

Funding Opportunity

Government of the District of Columbia Department of Health
Hiv/AIDS, Hepatitis, STD, and TB Administration

H A H S T A



Request for Applications (RFA)

RFA# HSG.FBHP021716

FY 2016 Facility-Based Housing Programs for Persons with HIV



The Department of Health (DOH) reserves the right without prior notice, to reduce or cancel one or more programs listed in this Request for Applications (RFA). DOH reserves the right to reject all applications, adjust the total available funds or cancel the RFA in part or whole. Funding levels for the total program and budget amounts of individual awards shall be contingent upon continued receipt of funding by DOH, as well as any reduction, elimination or reallocation of funds by a federal grantor, the Executive Office of the Mayor (EOM) and/or the Department of Health. Any adjustments shall be in accordance with authorizing legislation for the use of funds, all DC municipal regulations for grant-making and the applicable federal and DOH terms of agreement.

**Department of Health
HIV/AIDS, Hepatitis, STD, & TB Administration
Notice of Funding Availability
RFA# HSG.FBHP021716
FY2016 HIV Facility Based Housing Programs**

The Government of the District of Columbia, Department of Health (DOH) HIV/AIDS, Hepatitis, STD, & TB Administration (HAHSTA) is soliciting applications from qualified applicants to provide Facility-Based Housing (FBH) programs for HIV positive individuals and their families at risk for continued or chronic homelessness needing assistance to access or maintain permanent housing placement.

Up to \$526,428 in Housing Opportunity for Persons with AIDS (HOPWA) funds from the U.S. Department of Housing and Urban Development (HUD) will be made available in FY2016.

HAHSTA is seeking applicants who will offer comprehensive services for timely transition of participants to either self-supported permanent housing or a permanent supportive housing setting. Successful programs will include services to determine self-sufficiency or transition to supportive settings, establish linkages with relevant services (e.g., behavioral health, job preparation, employment placement, treatment adherence support, among others), and provide available services to clients waiting for housing services and resources.

HAHSTA intends to grant awards in two (2) categories, Emergency Housing with support services and Transitional Housing with support services. **An application is required for each service category.** Awards are projected to begin April 1, 2016. There will be 3 budget periods. The first budget period is prorated to 6 months, ending September 30, 2016. Subsequent budget periods will be for 12 months with the second beginning October 1, 2016. The number of awards, project periods and award amounts are contingent upon availability of funds and recipient performance.

The following entities are eligible to apply for grant funds under this RFA: not-for-profit providers operating as housing programs. Awards will be made to organizations located and providing services within the District of Columbia.

The release date of RFA# HSG.FBHP021716 is Wednesday, February 17, 2016. The HIV/AIDS, Hepatitis, STD & TB Administration will have the completed RFA available for pick up at 899 North Capitol Street, NE, 4th Floor and on the Office of Partnerships and Grant Services website at <http://opgs.dc.gov/page/opgs-district-grants-clearinghouse> on Wednesday, February 17, 2016.

The Request for Application (RFA) submission deadline is 4:30 PM on Friday, March 9, 2016. The Pre-Application conference will be held at 899 North Capitol, NE, 4th floor Conference Room, Washington, DC 20002, on **Thursday, February 25, 2016, from 10:00 AM to 11:00 AM.** If you have any questions, please contact Sherita.grant@dc.gov via email or by telephone at (202) 671-5062.

**District of Columbia Department of Health
RFA Terms and Conditions**

v06.2015

The following terms and conditions are applicable to this and all Requests for Applications issued by the District of Columbia Department of Health (DOH) and to all awards, if funded under this RFA:

- Funding for a DOH subaward is contingent on DOH's receipt of funding (local or federal) to support the services and activities to be provided under this RFA.
- DOH may suspend or terminate an RFA pursuant to its own grant making rule(s) or any applicable federal regulation or requirement.
- The RFA does not commit DOH to make any award.
- Individual persons are not eligible to apply or receive funding under any DOH RFA.
- DOH reserves the right to accept or deny any or all applications if the DOH determines it is in the best interest of DOH to do so. An application will be rejected if it does not comply with eligibility requirements, formatting or submission requirements outlined in the RFA. DOH shall notify the applicant if it rejects that applicant's proposal for review.
- DOH reserves the right to issue addenda and/or amendments subsequent to the issuance of the RFA, or to rescind the RFA. The prospective applicant is responsible for retrieving this information via sources outlined in the RFA (e.g. DC Grants Clearinghouse).
- DOH shall not be liable for any costs incurred in the preparation of applications in response to the RFA. The Applicant agrees that all costs incurred in developing the application are the applicant's sole responsibility. No funds already awarded the applicant under other instruments or agreements shall be used by the applicant to fund the preparation of the application.
- DOH may conduct pre-award on-site visits to verify information submitted in the application and to determine if the applicant's facilities are appropriate for the services intended.
- DOH shall determine an applicant's eligibility by way of local and federal registries for excluded parties searches and documents and certifications submitted by the applicant.
- The Applicant Organization must obtain a Data Universal Numbering System (DUNS) number to apply for funding and register for the federal System for Award Management (SAM) at www.sam.gov prior to award.
- DOH reserves the right to require registry into local and federal systems for award management at any point prior to or during the Project Period. This includes DOH electronic grants management systems, for which the awardee will be required to register and maintain registration of the organization and all users.
- DOH may enter into negotiations with an applicant and adopt a firm funding amount or other revision of the applicant's proposal that may result from negotiations.
- DOH shall establish terms of agreement for an award funded under this RFA. If funded,

the applicant will receive a Notice of Grant Award (NOGA). The NOGA will establish the project period (i.e. the total number of years for which funding has been approved) and define any segments of the Project Period (e.g. initial partial year, or a 12 month budget period). The NOGA shall outline conditions of award or restrictions.

- Continuation of funding, if awarded shall be based on availability of funds, documented satisfactory progress in interim and annual reports, continued eligibility and determination that the continued funding and activities is in the best interest of the District of Columbia.
- DOH shall provide the citations to the local or federal statute/s and implementing regulations that authorize the award; all applicable District of Columbia and Federal regulations, such as OMB Circulars 2 CFR 200 (effective December 26, 2014) and as applicable for any funds received and distributed by DOH under OMB circulars A-102, A-133, 2 CFR 180, 2 CFR 225, 2 CFR 220, and 2 CFR 215; payment provisions identifying how the awardee will be paid for performing under the award; reporting requirements, including programmatic, financial and any special reports required by the funding Agency; and compliance conditions that must be met by the awardee.
- If there are any conflicts between the terms and conditions of the RFA and any applicable federal or local law or regulation, or any ambiguity related thereto, then the provisions of the applicable law or regulation shall control and it shall be the responsibility of the applicant to ensure compliance.

Additional information about grants management policy and procedures may be obtained at the following site: www.opgs.dc.gov (click on Information) or click here: [City-Wide Grants Manual](#).

If your agency would like to obtain a copy of the **DOH RFA Dispute Resolution Policy**, please contact the Office of Grants Management and Resource Development at doh.grants@dc.gov or call (202) 442- 9237. Your request for this document will not be shared with DOH program staff or reviewers. Copies will be made available at all pre-application conferences.

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A. DOH Standard Terms and Conditions of Award

Section I. Background

Purpose of this Request for Applications (RFA)

Since its inception in 1990, the Housing Opportunities for Persons with AIDS (HOPWA) program has aimed to provide participants with tools to achieve self-sufficiency and independence by providing rental subsidy, comprehensive assistance from housing experts, as well as wrap-around services, as needed. The two components of the HOPWA Facility-Based Housing program – Emergency and Transitional – were instituted to provide participants in need with time-limited housing and supportive services targeted specifically to assist residents to make measurable progress towards attaining housing stability. The goal at the end of this transitional period is to have participants successfully move out of the program into stable housing, thereby making room for new participants who could benefit from HOPWA housing and services.

In this RFA, DOH is proposing a programmatic redesign to assure that the development of permanent housing plans, increasing household income through access to benefits and workforce development activities, and successful housing search are the primary activities of residents. As a result of a significant reduction in federal funding, this RFA also envisions contracting with a select number of providers that can closely monitor participant progress to yield successful results. In this redesigned Facility-Based Housing approach, the activities will provide short-term housing with an invigorated focus on housing independence and transition along the housing continuum. DOH defines the housing continuum as the most appropriate housing setting for a person, which could include self-sufficiency through employment, senior housing for a person 55 years old or older, or Veteran Affairs Supportive Housing (VASH) for returned veteran's permanent supportive housing if the individual has a co-occurring behavioral health condition or physical disability.

The Facility-Based Housing programs are designed to assist participating households that are seeking to exit or avoid imminent homelessness and move along the continuum to stable permanent housing. The services specifically supported under this RFA are intended to be provided within the context of the full range of housing, medical, behavioral health, education, employment and benefits access, and other supportive services available to low-income persons living with HIV in the District of Columbia.

Eligibility for participation in the **Facility-based Emergency Housing** program will be limited to PLWHA with incomes at or below 30% of area median who also are homeless or at imminent risk of homelessness – as defined by HUD¹ for the homeless Continuum of Care. The main goal of this program is successful exit to permanent housing in the shortest time necessary. All residents will be required to participate in the planning and active implementation of a permanent housing plan, with case manager support, and the two intended program objectives are to either:

- Help households get to a point where they can stabilize in shared or independent housing and pay rent independently in a timely manner – up to sixty (60) days in a six-month period; or

¹ http://b.3cdn.net/naeh/579e3b67bd7eeb3fc3_q0m6i6az8.pdf

- Serve as a bridge to a Permanent Supportive Housing program, for those who meet the level of need defined by the homeless Continuum of Care and are determined to be disabled and requiring that level of services due to a combination of chronic homelessness and severe and persistent mental illness and/or physical disability.

The **Facility-based Transitional Housing** program will be similarly focused on self-sufficiency and progress on the housing continuum with a 12 to 18 month period. In close collaboration with DOES, the program will provide employment-focused services in a temporary housing setting for those who are non-disabled and motivated to increase job skills and complete a self-defined career development program that will result in:

- Marketable job skills and internship/training opportunities, as available,
- Enrollment and ongoing participation in DOES (and/or other community-based) career development training and placement programs,
- Dependable income, and
- Budgeting and money management skills to become self-sufficient.

In order to accomplish this proposed redesign, HAHSTA is searching for prospective applicants with extensive experience in the domains of housing and those supportive services that promote self-sufficiency and housing stability. HAHSTA encourages applications that demonstrate a vast understanding of the navigation of supportive services and ensures that housing clients benefit from an array of services available; including non-HOPWA funds. Navigation of supportive services is intended to provide critically important support for individuals to maximize the likelihood of successful housing service delivery.

Prospective applicants must demonstrate their abilities to assess the needs of clients for housing-related service navigation, to understand the extent to which those needs are met by services supported through other funding sources, to create customized permanent housing plans, as well as to prepare participants for long-term, future housing stability.

Two housing services will be funded through this RFA:

- Facility Based Housing (Emergency) – one (1) provider
- Facility-Based Housing (Transitional) – one (1) provider

Both of these housing options will include staffing of navigators for employment and permanent housing settings. In addition, prospective applicants may propose project sponsor administrative costs for management, oversight, coordination, evaluation, and reporting on HOPWA-eligible activities specifically funded through this RFA.

Measurable Outcomes

There are three primary measurable outcomes for HOPWA Facility-Based Housing programs:

1. Increased housing stability
2. Increased household income

3. Ongoing connection to healthcare and services.

All measurable outcomes must be consistent with the Consolidated Plan for the District of Columbia and HOPWA reporting requirements. All participant-level data, including intake, assessment, ongoing case management notes and referrals, will be entered and managed in the District's Homeless Management Information System (HMIS). Key indicators to be reported by each prospective contractor include, but are not limited to, the following:

- The number of chronically homeless persons with HIV/AIDS who are housed.
- The number of marginally housed persons with HIV/AIDS moved to stable, long-term housing.
- The number of households supported to maintain stable housing.
- The number of persons with HIV/AIDS housed through the HOPWA program effectively transitioned to long-term or permanent housing supported by other sources of funding.
- The amount of leveraged resources (housing assistance and/or supportive services) secured to extend the funding available through this procurement.
- The number of households receiving housing assistance in which one or more individuals receive appropriate HIV primary health care.
- The number of individuals with HIV/AIDS receiving housing assistance able to access ongoing medical assistance support.
- Increases in income from employment or benefits among those receiving housing assistance.
- The number and proportion of people with HIV who receive housing assistance as well as regular primary outpatient medical care and medical case management services.

Available Funding & Period of Funding

Up to \$526,428 in HOPWA funds from the U.S. Department of Housing and Urban Development (HUD) will be made available in FY2016. HAHSTA intends to grant up to two (2) awards. The grants supported by funds awarded under this RFA are expected to begin on April 1, 2016, with a period ending September 30, 2016. Pending performance reviews, compliance with reporting requirements and availability of funds, awards may be extended for two option years after September 30, 2016, i.e. through Sept. 30, 2017 and Sept. 30, 2018, respectively.

The table below displays the expected amount of the award and the number of awards expected for each service category.

Services	Expected Funds	Expected Awards
Facility-Based Housing (Emergency)	\$ 189,610	\$ 176,337
Facility Based Housing (Transitional)	\$336,818	\$313,241
Project Sponsor Administration		\$ 36,850

Total	\$526,428	
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Eligible Applicants/Prospective Applicants

The following types of organizations/entities are eligible to apply for grant funds under this RFA:

- Not-for-profit organizations with a demonstrated track record in providing housing and/or services to people living with HIV/AIDS and/or experiencing homelessness.
- Not-for-profit organizations with strong fiscal management skills and experience.
- Public housing agencies.

Section II. Program Plan

Two Types of Facility-based Housing Proposed:

This section of the RFA includes information that applies to both the Emergency and Transitional Facility-based Housing programs. A critical component for both is the success of participants in developing and executing individualized Permanent Housing Plans that maximize self-sufficiency by the end of their stay, whether it is for less than sixty days or more than eighteen months. Ensuring that participants can access appropriate housing destinations at program exit will be a key outcome used to determine funding awards.

- 1) The **Facility-based Emergency Housing** program will focus on those participants whose household income are at or below 30% of the area median, i.e. court-ordered notice of eviction (see HUD's definition of homelessness²). This may include, but is not limited to:
 - Low income HIV-positive individuals;
 - Individuals who are currently homeless or have a documented imminent risk of homelessness;
 - Individuals with multiple diagnoses of co-occurring HIV, substance use disorders and severe and persistent mental illnesses;
 - Individuals who have histories of chronic homelessness;
 - Individuals who have been recently released from incarceration or other custody without an appropriate housing destination; and
 - Transgender individuals who can document housing discrimination.

² http://b.3cdn.net/naeh/579e3b67bd7eeb3fc3_q0m6i6az8.pdf

- 2) The **Facility-based Transitional Housing** program provides temporary housing services to DC residents who are HIV-positive, and their families, with household incomes at or below 50% of the area median.

The program will provide employment-focused services with time-limited housing assistance for those who are non-disabled and motivated to increase job skills and complete a self-defined career development program that will result in:

- Marketable job skills and internship/training opportunities, as available,
- Enrollment and ongoing participation in DOES (and/or other community-based) career development training and placement programs,
- Dependable income, and
- Budgeting and money management skills to become self-sufficient within 12-18 months.

Transition Plan and Entry into HOPWA-funded Facility-based Housing Programs

As there will be two distinct Facility-based Housing programs, two different selection models will be utilized: vulnerability-based and success-based.

- Vulnerability-based selection refers to those participants with the most difficulties and the fewest options available to them (Emergency Housing). The Homeless Coordinated Entry System will be the point of entry responsible for ensuring that all participants meet the eligibility requirements of the Facility-based Emergency Housing program.
- Entrance into the employment-oriented Transitional Housing program will be for those participants with the motivation and aptitude to attain self-sufficiency as a result of their own efforts, as supported by targeted housing case management and employment services. Application for the employment-oriented program will be handled exclusively via an online application process managed, at least at the outset, within HAHSTA.

Depending upon the final selection of facility-based housing providers, the provider may propose housing both populations, though it must be kept in mind that the two programs are different in terms of the length of stay, therefore, two separate applications must be submitted for each category.

Applicants will be referred to HOPWA-funded and other homeless Continuum of Care Emergency Housing providers based on the scoring determined through the homeless coordinated entry process. There will no longer be a separate HOPWA emergency housing application, referral process or waiting list. All residents for HOPWA-funded emergency housing will be referred through the coordinated entry system.

Further, Transitional Housing providers will be asked to create an individualized transition plan for all current transitional housing residents. Those who apply for and are accepted into the new program (application will be open to all current residents of HOPWA transitional and emergency housing) will be notified of the details of the program's start up and assisted to make transition plans accordingly. For those residents who either (1) do not apply for the new program or (2)

apply but are not accepted, their current housing provider will be asked to develop a personalized transition plan. (Details to be determined based on the outcome of this selection process.)

HOPWA Facility-based Housing

Prospective applicants should include a description of their plan to implement, monitor and maintain organizational linkages to primary health care, medical case management, mental health treatment, permanent housing placement and employment and training services.

In addition, all prospective applicants must demonstrate:

- Capacity to meet all federal, state, and local regulations including those stipulated in the HOPWA regulations (24 CFR part 574).
- That all facilities funded by HOPWA meet Housing Quality Standards and provide documentation upon request of an environmental review as required by the HOPWA regulations (reference 24 CFR Part 574).
- Leveraged funds to support costs not funded through the HOPWA grant. Awards may not cover the entire cost of programming for the facility. Each prospective contractor should show an ability to leverage other funding sources in support of the HOPWA program.
- A quality management plan to ensure the delivery of high quality housing services.
- Capacity to meet data reporting and record keeping requirements as established by HAHSTA and by the U.S. Department of Housing and Urban Development (HUD). Please note that beginning October 1, 2015, HAHSTA will require that all data collection and reporting be conducted through the District of Columbia's Homeless Management Information System (HMIS).
- The ability to provide non-discriminatory and culturally competent services to the target population, including transgender.
- Expertise in providing housing and the identified targeted support services, linkages and referrals to the proposed target population(s).
- A plan to establish and maintain organizational linkages with health care and supportive services including primary health care, medical case management, mental health treatment, long-term substance abuse treatment, permanent housing placement services, and education, employment and training programs and resources.

Required Program Service Elements

The plan for these funds is to support programs that are designed to provide an intensive set of supportive services related to housing stability and self-sufficiency, as needed. All prospective applicants must propose how they will provide all of the following services via direct DOH funding or through leveraged funding support:

- Participant residency or occupancy costs; and

- Navigation of services: Prospective contractors should have staff available to ensure that participants are assessed and re-assessed for supportive service needs, such as involvement in medical care, options for permanent housing placement, and linked as appropriate to a continuum of care to address their individualized needs.

Navigation of services must be available as part of the required program service elements, and those needed by residents that are beyond the above mentioned on-site requirements may be provided on-site, off-site, or through a formal linkage with another organization. For example, the prospective applicant will be expected to work closely with DOES to ensure that participants are enrolled and actively connected to the DOES system. There is no opportunity to fund services independent of the facility-based program, and the amount of funding available for supportive services under this RFA is very limited. Prospective applicants are expected to describe their plan to meet the supportive service needs of participants through any combination of HOPWA funding, alternative funding sources, and documented relationships with partners.

Prospective applicants must demonstrate how the provision of service delivery will improve participant access to long-term housing that maximizes self-sufficiency and maintains ongoing HIV primary care.

Prospective applicants must define the proposed target population by describing the need for services as well as the organization's expertise in addressing those needs. Prospective applicants must further demonstrate how the proposed mix of program service elements will assist the target population in achieving permanent housing placement, self-sufficiency and linkages to medical and behavioral health care. Prospective applicants should emphasize the particular service elements that are most impactful in assisting the target population in overcoming barriers to housing, employment and health care.

Program Data Collection and Reporting Requirements

The prospective applicants shall utilize the web-based District of Columbia Homeless Management Information System (HMIS) to capture participant-level data on all persons served. Utilization shall include the maintenance of sufficient computer equipment for all relevant staff to enter participant-level data into the HMIS. The prospective applicants will ensure that participant-level data is entered into the HMIS in a manner that is accurate, timely, and in accordance with the most recent HUD Data Quality Standards on a regular and ongoing basis. All computers used to access the HMIS must have the ability to connect to the Internet. DOH will utilize HMIS data entered by each prospective contractor to conduct analysis of program activities and outcomes, as well as to complete all reporting required by the District and Federal Governments, including the annual HOPWA CAPER.

Summary of Basic HMIS Data Requirements:

1. Universal Data Elements: HMIS Universal Data Elements are elements required to be collected by all projects participating in HMIS, regardless of funding source.

Federal Partner Funding Source – All projects that are funded by a federal partner must have each grant associated with the project recorded in the HMIS. The federal funding source information must include: the name of the federal partner program and component the grant is

provided for; a grant identifier (grant number or other identification associated with the specific funding source); grant start date; and grant end date.

Method for Tracking Emergency Shelter Utilization – Each emergency shelter project must be associated with one method of tracking residence. Careful selection of the method is critical for outcome reporting.

2. Additional HOPWA-required fields related to reporting on service delivery:

4.14C – HOPWA Services Provided: to be updated each time services are provided. HOPWA requires that all stayers at the end of the grant operating year, prior to the generation of their Annual Report (CAPER), update services for all participants.

4.15A – HOPWA Financial Assistance: to be updated, as required, each time financial assistance is provided. **Used to** track financial assistance provided to participants in Permanent Housing Placement (PHP) or STRMU during project participation.

4.39 – Medical Assistance: to be collected at project entry and exit. In addition, data should be updated during their stay, as needed. Medical assistance information is important to determine whether HIV positive participants are accessing medical assistance benefits for which they may be eligible.

Facility-based Housing (Emergency)

For the purposes of this RFA, Facility-based Housing (Emergency) is a program serving HIV-positive and homeless individuals that might need additional physical support. “Homeless” individuals lack a primary nighttime residence or are sleeping in a place that is not designed for, or ordinarily used as, a regular sleeping accommodation for human beings. Not included in this definition are those individuals who are temporarily staying in another emergency shelter or transitional housing program or who have other temporary arrangements for nighttime residence, such as temporarily staying with friends or relatives. For a detailed description of homelessness as implemented in the HEARTH Act Interim Rule, please visit the HUD Exchange website³.

Prospective applicants for Facility-based Housing (Emergency) must demonstrate an ability to serve populations that are literally homeless or at imminent risk of homelessness. These populations may include, but are not limited to, the following:

- Individuals recently released from medical facilities without a discharge plan that includes housing.
- Individuals returning to the community after incarceration without a placement plan that includes housing.

³ <https://www.hudexchange.info/resource/2033/hearth-coc-program-interim-rule/>

- Individuals who are situationally homeless, that is, without shelter and without resources or prospects for housing.

Prospective applicants must agree to establish linkages with the District's coordinated entry system as the only portal through which applicants will be able to access HOPWA-funded emergency housing and through which shelter guests may be able to access other area emergency, transitional and permanent housing providers for the purposes of referring participants and for ensuring that those who do not have a more permanent housing option at the end of their 60-day maximum stay period are not unnecessarily discharged without another housing option.

A critical component for Facility-based Housing (Emergency) services is supporting participants to develop and execute a plan that assures tenancy in the emergency housing program of no more than 60 days during any six-month period and details a path to self-sufficiency. Transition from the emergency setting to a longer-term subsidized housing program is an acceptable option, and this should be coordinated with homeless Continuum of Care options whenever appropriate.

(Please note that the District's HOPWA-funded facility-based transitional housing program will entail a separate online application process that is outside the HMIS-based homeless continuum of care resources and referral system.)

Facility-based Housing (Transitional)

Facility-based Housing (Transitional) is a program serving HIV-positive individuals through time-limited housing assistance and targeted supported services with the goal of assisting them to access and maintain permanent housing with maximum self-sufficiency. Prospective applicants applying for transitional housing must demonstrate an ability to serve populations that, without programmatic support, would be at-risk for episodic homelessness and continuing difficulties achieving income sufficient to support housing costs in the private market.

Prospective applicants should design service support programs that enable motivated and competent residents to gain independence within 12 to 18 months. Please note that under no circumstances may a transitional program provide assistance to any individual or family for no longer than two years (24 months). Each prospective provider should ensure and be able to demonstrate that the program design promotes permanent housing placement and increases in household income efficiently with the shortest residency time necessary to move participants on to stabilize in independent housing.

Emphasis should be placed on the programmatic elements necessary to address barriers to long-term housing for the identified target population. This should include linkages to services designed to promote skills-building, address needs, and remove barriers. Prospective applicants must demonstrate an ability to provide their identified target population with access to the continuum of services necessary to promote self-sufficiency.

Supportive Services Linked to Attaining Housing Stability and Self-Sufficiency

Generally, to be supported under this RFA, services funded by HOPWA must be intended to improve the housing stability and self-sufficiency of participants served. Core services include:

- Navigation
- Access to Benefits and Services
- Education, employment and training activities
- Transportation assistance
- Meals, food and nutrition
- Counseling for legal issues directly related to accessing housing and employment, such as unresolved rent and utility arrearages, clearing inaccurate prior eviction and arrest records, and handling histories of incarceration

Housing Navigation, Client Self-Advocacy, and Access to Benefits and Services

This supportive service may be proposed for navigation activities specific to the housing stability of participants and will not be awarded for general case management. Activities that are available are as follows:

- Assisting residents to develop, implement and manage a personalized permanent housing plan. The plan should include, as appropriate, elements of the initial psychosocial screening conducted as part of the entry into the Facility-Based Housing program.
- Assisting residents to understand their eligibility for and the process of enrolling themselves (and any associated family members) in such benefits as food stamps, Medicaid, Social Security Income (SSI), and Social Security Disability Income (SSDI).
- Assisting residents to maintain an ongoing connection with an ambulatory outpatient medical care provider and associated medical case management.

Employment services

This supportive service must be proposed to offer employment assistance based on participant needs and interest. Employment (or workforce development) services is a general term that encompasses a range of activities that facilitate employment for individuals. Facility-based housing providers are expected to focus activities on strengthening the capacity of PLWHA to find and maintain employment in order to enter or reenter the workforce.

Employment Navigators are expected to:

- Meet people where they are at regarding their process of pursuing employment.
- Acknowledge the specific challenges that PLWHA face when seeking and maintaining employment.
- Support job seekers in navigating important considerations related to medical, legal, financial, psychosocial, and vocational issues.
- Identify individual interests, values, strengths, barriers and job readiness to assist job seekers in making well-informed decisions about employment.
- Provide information and guidance about employment-related legal protections that cover PLWHA.

- Address concerns and fears regarding benefits such as SSDI/SSI, housing subsidies, and health care through planning efforts.
- Focus not only on job finding, but also on job retention during the crucial first several months of employment

Employment Navigators will work closely with workforce development programs implemented through the DC Department of Employment Services (DOES), the DC Department of Disability Services (DDS) and other community-based workforce, training and education entities.

For additional information related to HOPWA's workforce development initiative, please visit: <https://www.hudexchange.info/resources/documents/HOPWA-getting-to-work-pamphlet.pdf>

Meals and Nutritional Services

This supportive service must be proposed to provide meals, snacks, and nutritional supplements to participants living in Facility-Based Housing programs.

Transportation Assistance (including Metro Passes)

This supportive service must be proposed to support transportation of new participants to the Facility-based Housing site, or to transport participants from the site to medical and supportive services, or other activities detailed in their permanent housing plans.

The prospective applicants must propose to use licensed, insured vehicles to provide transportation and should propose a methodology to allocate costs for the residents served under the Facility-Based Housing program that is consistent with generally accepted accounting principles (GAAP) and 24 CFR 200 Subpart E – Cost Principles⁴.

Prospective applicants may propose to purchase and distribute fare cards and SmarTrip passes, and will propose a plan to ensure security of the fare cards and passes, as well as a means to ensure that the passes are used for transportation to and from the Facility Based Housing site and the allowable service or activity. Note: Organizations funded in the District of Columbia with CARE Act funds may have a budget to support the transportation of participants for services provided on-site.

Counseling for legal issues directly related to accessing housing and employment

Prospective applicants must demonstrate navigation capacity to connect participants to relevant legal services to address such as problems as: unresolved rent and utility arrearages, clearing inaccurate prior eviction and arrest records, and handling histories of incarceration.

⁴ <https://www.law.cornell.edu/cfr/text/2/part-200/subpart-E>

Substance Abuse and Mental Health Counseling Services

Prospective applicants must demonstrate navigation capacity to connect participants to relevant substance use and/or mental health services.

REMINDER: This RFA proposes two very different types of Facility-based Housing. A critical component for both is participants' success in developing and executing an individualized Permanent Housing Plan that maximizes self-sufficiency by the end of their stay, whether it's for less than sixty days or more than eighteen months. Ensuring that participants can access appropriate housing destinations at exit from the program will be a key outcome used to determine funding awards.

A) The **Facility-based Emergency Housing** program will focus on those whose household income is at or below 30% of the area median and are currently homeless or have a documented imminent risk of homelessness, i.e. court-ordered notice of eviction (see HUD's definition of homelessness⁵):

- With multiple diagnoses of co-occurring HIV, substance use disorders and severe and persistent mental illnesses;
- Who have histories of chronic homelessness;
- Those who have been recently released from incarceration or other custody without an appropriate housing destination; and
- Transgender individuals who can document housing discrimination.

B) The **Facility-based Transitional Housing** program will provide temporary housing services for DC residents who are HIV-positive, and their families, with household incomes at or below 50% of the area median.

The program will provide employment-focused services with time-limited housing assistance for those who are non-disabled and motivated to increase job skills and complete a self-defined career development program that will result in:

- Marketable job skills and internship/training opportunities, as available,
- Enrollment and ongoing participation in DOES (and/or other community-based) career development training and placement programs,
- Dependable income, and
- Budgeting and money management skills to become self-sufficient within 12-18 months.

Section III. Application Preparation and Submission

Application Elements:

1. Attachment A: RFA Checklist
2. Attachment C: Applicant Profile
3. Attachment D: Client Summary

⁵ http://b.3cdn.net/naeh/579e3b67bd7eeb3fc3_q0m6i6az8.pdf

4. Attachment E: Linkages Summary Table
5. Attachment F: Other Sources of Funding
6. Attachment H: Budget and Budget Narrative
7. Table of Contents (One page)
8. Abstract (One page)
9. Population(s) to be Served and Need (Maximum five pages)
10. Organizational Capacity (Maximum seven pages)
11. Program Plan(s) as applicable
 - a. Program Plan : Facility Based Housing (Emergency & Transitional) Maximum ten pages
12. Evaluation, Reporting, Monitoring and Quality Assurance (5 pages)

Applicants should feel free to submit fewer pages than the maximum stated. The maximum number of pages for each section **cannot exceed that stated above.** The review panel shall not review applications that do not conform to these requirements.

Application Element Details

This section provides some additional information on selected application elements. Many of the application elements consist of forms that are not described below, but are required for submission and review.

Each application package is required to contain the following information and shall be divided by labeled index tabs that clearly mark each section. Applications must conform to the page requirements by section detailed below.

2. Attachment C: Applicant Profile

Each application shall have an Attachment C: Applicant Profile affixed to the outside of each envelope, which identifies the applicant, type of organization, project service category and the amount of grant funds requested. Project service categories or funds not included on this profile may not be considered for review.

7. Table of Contents

Lists major sections of the application with quick reference page indexing. Failure to include an accurate Table of Contents may result in the application not being reviewed fully or completely.

8. Abstract

This section of the application should provide a summary overview of the applicant's total grant application including a description of how the proposed service(s) will improve housing stability, promote self-sufficiency, enhance quality of life and engage clients living with HIV into medical care.

The application should provide a narrative description organized in the following sections. Proposals will be evaluated on the basis of the narrative provided. See the “Review Process” section for the scoring criteria and points available.

9. Population(s) to be Served and Need for Services (Maximum five pages)

Provide a description for the population(s) proposed to be served through this RFA. Include in this discussion

- The demographic characteristics of the population to be served, including racial and ethnic distribution, gender, age and family status.
- The geographic area in which the population is found.
- The geographic area in which the population will be served.
- The barriers to service commonly experienced.
- Provide a description of the specific housing-related needs of the population to be served.

10. Organizational Capacity (Maximum seven pages)

Describe the experience and capability of the applicant with regard to providing housing and housing support services. Include in this discussion

- The type of housing and housing supportive services currently provided.
- The other services (that is, other than housing and housing supportive services) provided by the organizations to people with HIV/AIDS, or people with other chronic illness.
- The ability of the organization to expand services in the event that additional funds become available under this category.
- The current capacity of the organization to collect, analyze and report program data. Provide examples of similar services on which the organization now reports, if appropriate.
- The experience of the organization in maintaining partnerships with other organizations, including a discussion of the documentation of these partnerships. Describe in particular any partnerships with providers of ambulatory outpatient medical care.

- Experience with managing a program that requires understanding and knowledge of general housing principles, for example, property management, development, landlord-tenant rights and responsibilities, housing intake, resource and referral management, lease negotiation, mediation.
- Provide a summary of the housing status of each client served during the twelve months that began October 1, 2014 – September 2015. Specifically, provide the unduplicated number of individuals served.
- Provide the number of clients served by either emergency or transitional housing assistance whose term of service (up to six months for Emergency, up to twenty-four months for Transitional) concluded during the twelve month period. The term of service is up to six months for emergency housing assistance, and up to twenty-four months for transitional housing assistance.
- Of these clients, the number and proportion of clients whose housing status at the end of the term of service:
 - i. Changed from Emergency to Transitional Housing assistance
 - ii. Change Emergency Housing provider
 - iii. Changed from Transitional to Permanent housing, including permanent subsidized housing
 - iv. Changed Transitional Housing provider
 - v. Continued service beyond the expected term of service
 - vi. Unknown
 - vii. Other

1. Program Plan: Facility-Based Housing (Emergency & Transitional) Maximum ten pages each)

Provide a description of the services to be provided in this category. Describe

- The plan to respond to the key activities described for this service category. Include a complete description of the proposal to establish or maintain collaborations.
- The set of services that will comprise the Facility-Based Housing Program, including location, capacity and staffing related to the Facility Cost.
- Describe the number of clients served during a recent twelve-month period (beginning no later than October 1, 2014 – September 30, 2015), and provide a summary of the results of the service to the client. In particular, provide a summary listing of the housing status of clients served at the end of a sixty-day emergency housing placement. If available, provide a summary listing of the housing status of

clients served six months following the end of a sixty-day emergency housing placement.

- The impact of the services proposed. Provide a specific plan for addressing the barriers most commonly experienced by the clients and potential clients targeted.
- The capacity of the proposing organization to provide the services proposed in ways that are culturally appropriate and linguistically competent for the populations proposed to be served.
- The plan for developing and implementing a housing stability plan for each client during residence in the Facility-Based Housing (Emergency) program.
- The plan for data collection, analysis and reporting. Propose key elements that should comprise the data collected.

Application Format

- Font size: 12-point unreduced
- Spacing: Double-spaced
- Paper size: 8.5 by 11 inches
- Page margin size: 1 inch
- Numbering: Sequentially from page 1 (Application Profile, Attachment B) to the end of the application, including all charts, figures, tables, and appendices.
- Printing: Only on one side of page
- Binding: Only by metal (binder) clips or by rubber bands; do not bind in any other way

Application Submission

Applications must be submitted to the appropriate administrative agency by **4:45 p.m. on Friday, March 9, 2016**. Applications delivered after the deadline will not be reviewed or considered for funding. Applicants are required to submit an original hard copy, printed copies of the application and a copy on compact disk (CD) or jump drive. The original hard copy, each copy, and the CD or jump drive (where applicable) must be submitted in separate envelopes. Each of the envelopes must have a copy of the RFA Checklist (Attachment A), Applicant Profile (Attachment C) and Application Receipt (Attachment J) attached.

An electronic copy of the application must be submitted via jump drive inclusive of all application elements and attachments, compiled in separate files labeled with the titles below and organizational initials:

1. Attachment C: Applicant Profile (MS Word)

2. Attachment D: Client Summary (MS Word)
3. Attachment E: Linkages Summary (MS Word)
4. Attachment F: Other Sources of Funding (MS Word)
5. Attachment H: Budget and Budget Narrative (MS Word and MS Excel)
6. Table of Contents (MS Word)
7. Abstract (MS Word)
8. Population(s) to be Served and Need (MS Word)
9. Organizational Capacity (MS Word)
10. Program Plan(s)
 - a. Facility-Based Housing: Emergency & Transitional (MS Word)
11. Attachment N: Medicaid Eligibility Chart (MS word file)
12. Organizational Chart (MS word file)

Files must have clear identifiable titles for all application elements. Each component of the application must be saved in a separate document file on the CD or thumb drive. See Attachment A: Application Checklist for a listing of the files, file types and naming conventions.

Applications that are mailed or delivered by messenger or courier services must be sent in sufficient time to be received by the deadline at the appropriate locations. Applications arriving via messenger or courier services after **4:45 p.m. on Friday, March 9, 2016** will not be accepted.

Submit one printed original, three printed copies one copy on a jump drive of your application package.

Staff of the HIV/AIDS, Hepatitis, STD, TB Administration Care, Housing and Support Service Bureau must accept and provide a written receipt for application(s) and assurance package(s) for them to be considered received.

Applications must be delivered to:

District of Columbia Department of Health

HIV/AIDS, Hepatitis, STD and Tuberculosis Administration

899 North Capitol Street NE Fourth Floor

Washington DC 20002

Note: The location is in a government facility. All individuals entering the building will be required to show a government-issued identification and be screened by security staff. Delays in entering the building or proceeding to the Fourth Floor will not be grounds for accepting applications after 4:45 pm on Friday, March 9, 2015.

Section IV. Application Procedures

1. Pre-application Conferences

One Pre-Application Conference will be held, on **Thursday, February 25, 2016 from 10:00 am to 11:00 am** at the District of Columbia Department of Health, 899 North Capitol Street NE Fourth Floor, Washington, DC 20002.

2. Internet

Applicants who received this RFA via the Internet shall e-mail Sherita Grant at Sherita.Grant@dc.gov with the information listed below. Please be sure to put "RFA Contact Information" in the subject box.

Name of Organization

Key Contact

Mailing Address

Telephone and Fax Number

E-mail Address

This information shall be used to notify applicants re: updates or addenda to this RFA.

3. Letter of Intent

A letter of intent (LOI) is not required, but this information will assist HAHSTA in planning for the review process. Please fax only one LOI per organization to HAHSTA, using the form in Attachment A, no later than 3:00pm on February 24, 2016. Copies of the LOI may be submitted at the Pre-Application Conference.

4. Contact Information of Applicants

In order to ensure consistent access to information about this RFA, HAHSTA asks that all questions or requests for clarification be sent via e-mail to Patrice Bailey at Patrice.bailey@dc.gov. The last day to submit questions for a response is March 2, 2016.

HAHSTA will notify all potential applicants in writing of any updates, addenda and responses to frequently asked questions.

Note: This information can only be received if you have provided HAHSTA with your contact information at either the pre-application conference or via e-mail to the HAHSTA contact.

HAHSTA Contact: Sherita Grant, Housing Coordinator

E-Mail: Sherita.Grant@dc.gov

Phone: (202) 671-5062.

Section V. Review Process and Funding Decisions

REVIEW AND SCORING OF APPLICATION

Technical Review

All applications will be reviewed initially for completeness, formatting and eligibility requirements by DOH personnel prior to being forwarded to the external review panel. Incomplete applications and applications that do not meet the eligibility criteria will not advance to the external review. Applicants will be notified that their applications did not meet eligibility.

External Review Panel

The review panel will be composed of neutral, qualified, professional individuals who have been selected for their unique experiences in human services, public health nutrition, health program planning and evaluation, and social services planning and implementation.

The panel will review, score and rank each applicant's proposal based on the criteria outlined in the RFA. Individual panel members are required to provide a summary of strengths and weaknesses found in the application.

Internal Review

DOH program managers will review the individual and summary recommendations of the external review panel and make recommendations for awards. Program Managers will weigh the results of the review panel against other internal and external factors in making the final funding determinations. Those factors will include minimally a past performance review, risk assessment and eligibility assessment, including a review of assurances and certifications, and business documents submitted by the applicant, as required in the RFA. DOH will also conduct an excluded parties list search (EPLS) of the organization and executives via the federal System for Award Management (SAM) and conduct an DC Clean Hands review to obtain DC Department of Employment Services and DC Office of Tax and Revenue compliance status.

In this phase of the review process, DOH reserves the right to request clarifying supplemental information from applicants and request on-site pre-decisional reviews for those applicants being considered for award. Any request for supplemental information or on-site visits is not a commitment by DOH to fund the applicant.

The internal review panel prepares and submits a formal recommendation of prospective awardees, funding levels and service/activities to the DOH Director for signature. The DOH Office of Grants Management is responsible for certifying that all District rules and standards were followed for the RFA process.

In addition to your application's comprehensive objective review, the following factors may affect the funding decision:

- Considerations will be given to both high and lower prevalence areas: the number of funded organizations may be adjusted based on the burden of infections in the jurisdiction as measured by AIDS reporting.
- Funded applicants are balanced in terms of targeted racial/ethnic minority groups. (The number of funded applicants serving each racial/ethnic minority group may be adjusted based on the burden of infection in that group as measured by HIV or AIDS reporting.)
- Funded applicants are balanced in terms of targeted risk behaviors and HIV serostatus. (The number of funded applicants serving each risk group may be adjusted based on the burden of infection in that group as measured by HIV or AIDS reporting.)
- Funded applicants are balanced in terms of geographic distribution. (The number of funded applicants may be adjusted based on the burden of infection in the jurisdiction as measured by HIV or AIDS reporting.)
- Funded organizations have substantial experience serving the proposed target population.

Award amounts are dependent available funds.

Scoring Criteria

All applicants responding to the RFA shall be evaluated by the following selection/scoring criteria, with a total possible score of 100 points. The grant applications will be objectively reviewed against the specific scoring criteria listed below.

Note: The total score for applicants will vary. Each Program Plan is evaluated and scored independently. Review of scores will account for these variations.

Scoring Area 1: Population to be Served and Need

Maximum five pages, maximum score 15 points

In this section, the applicant describes the needs for services and the characteristics of the population or population(s) to be served. Evaluation criteria for this section include

1. Applicant demonstrates a thorough understanding of the need for the service proposed.
2. Applicant describes the need for the service proposed in terms of
 - a. The housing-related needs experienced by clients

- b. The contribution of the service proposed to improving the housing stability of clients.
 - c. The contribution of the service proposed to the long-term self-sufficiency of clients.
 - d. The gaps in existing service systems that the proposed service will address.
3. Applicant demonstrates a clear understanding of the population or population(s) to be served.

Scoring Area 2: Organizational Capacity

Maximum seven pages, maximum score 35 points.

The applicant demonstrated the knowledge and experience necessary to provide the proposed services to the population or population(s) to be served. Evaluation criteria for this section include:

- Applicant demonstrates its technical competence to provide the services proposed.
- Applicant demonstrates the cultural competence and language capacity to provide the services proposed to the population or population(s) to be served. Applicant demonstrates appropriate and necessary sensitivity to remove barriers created by racial and ethnic diversity, economic status, gender identity, disability, sexual orientation and similar factors.
- Applicant has demonstrated the ability to create or maintain partnerships required for provision of the service.

Scoring Area 3: Program Plan

Maximum ten pages, maximum score 50 points.

In this section, the applicant describes the plan to provide services that meet the needs identified for the population or population(s) to be served. Evaluation criteria for this section include

- Applicant demonstrates a thorough understanding of the barriers to service experienced by the population or population(s) to be served, and has proposed a set of service activities to address those barriers.
- The plan for services includes a clear description of the services to be provided, including a quantifiable set of units of service.
- The plan for services includes a clear description of the number of people with HIV to be served, as well as a clear description of the number of family members of people with HIV to be served.

- The applicant provides detailed information on how the proposed program will be implemented. The applicant presents relevant and realistic objectives and activities. The goals and objective of the activities are clearly defined, measurable and time specific. The applicant describes how services are to be provided (e.g. by the organization or in collaboration with another organization).
- The applicant describes how the program will be effectively managed and demonstrates that the skills and experience of the proposed program staff are adequate to needs of the proposed program.
- The expected impact of the program on the target populations(s) is clearly delineated and justified as to one or more of the following:
 - The number of chronically homeless persons with HIV/AIDS who are housed.
 - The number of marginally housed persons with HIV/AIDS who are moved to stable, long-term housing.
 - The number of households who are supported to maintain stable housing.
 - The number of persons with HIV/AIDS housed who are effectively transitioned to housing supported by other sources of funding.
 - Number of households receiving housing assistance that house one or more individuals receiving appropriate HIV primary health care.
 - The number of persons with HIV/AIDS housed through the program who are effectively transitioned to housing supported by other sources of funding.
 - Increases in income from employment or benefits among those receiving housing assistance.

Scoring Area 4: Budget & Budget Narrative

No Points Awarded

The budget and budget narrative will be reviewed during the selection process, but is not included in the scoring of the proposal. Comments on the budget will be invited from the review panel and HAHSTA, and will help guide the negotiation of the budget with those proposals that are recommended for funding.

In preparing budgets, applicants are advised to

- Maximize the cost efficiency of the services provided
- Provide a clear description of the contribution of each item proposed in the budget towards achieving the goals of the program

- Support – to the extent permitted by the funding source – necessary and appropriate indirect and administrative costs

Section VI. Budget Development and Description

For the purposes of this RFA, three distinct approaches are required for development and description of the budget, discussed below in “Budget Development (Facility Based Housing Rate),” “Budget Development (Supportive Services)” and “Budget Development (Project Sponsor Administration)”.

Budget Development (Supportive Services)

Applicants for one or more supportive service will include a detailed line-item budget and budget justification that describes the costs proposed to implement the proposed supportive service. See Attachment H for the on-line location of an Excel workbook for this budget proposal.

HAHSTA may not approve or fund all proposed activities. Give as much detail as possible to support each budget item. List each cost separately when possible.

Provide a description for each job, including job title, function, general duties, and activities related to this grant: the rate of pay and whether it is hourly or salary; and the level of effort and how much time will be spent on the activities.

Budget Development (Project Sponsor Administration)

Federal legislation imposes a maximum of seven percent (7%) for all administrative or indirect costs activities for Housing Opportunities for Persons Living with HIV/AIDS sub-grants. Organizations with a current and approved local or federal Negotiated Indirect Cost Agreement (NICRA) may propose a rate for administrative and indirect costs, provided that the proposed rate does not exceed seven percent of the proposed budget. Organizations that do not have a current and approved NICRA will propose specific budgets for staff and other costs that comprise the administrative and indirect costs.

HAHSTA may not approve or fund all proposed activities. Give as much detail as possible to support each budget item. List each cost separately when possible.

Provide a description for each job, including job title, function, general duties, and activities related to this grant: the rate of pay and whether it is hourly or salary; and the level of effort and how much time will be spent on the activities.

Section VII. Post-Award Activities

Successful applicants will receive a Notice of Grant Award (NOGA) from the DOH HAHSTA Grants Management Office. The NOGA shall be the first binding, authorizing document between you and DOH HAHSTA. The NOGA will be signed by an authorized grants management officer and mailed to the fiscal officer or executive director identified in the application. Next you will be required to meet DOH HAHSTA staff and submit final scope of work and table of deliverables (Table A's) and budget and justification revisions, AND sign a grant agreement

between you organization and the DOH HAHSTA. **Standard DOH Terms of Agreement are located in SECTION X and apply to this Request for Applications.**

Grantees must submit monthly data reports and quarterly progress and outcome reports using the tools provided by HAHSTA and following the procedures determined by HAHSTA. If you are funded, reporting forms will be provided during your grant-signing meeting with HAHSTA. For FY09, we performing an in-depth review of reporting forms and variables, and will be both soliciting input on streamlining reports and selecting key variables, and also implementing data quality measures to ensure the reported data are valid and consistent across providers.

Continuation funding is dependent upon the availability of funds for the stated purposes, fiscal and program performance under the sub-grant agreement, and willingness to incorporate new District-level directives, policies, or technical advancements that arise from the community planning process, evolution of best practices, or other locally relevant evidence.

Section VIII. Assurance Submission Requirements

This section describes the requirements for submission of assurances, certifications and other documents required.

Assurances and certifications are of two types: those required to submit applications and those required to sign grant agreements. Failure to submit the required assurance package will make the application ineligible for funding consideration [required to submit assurances] or in-eligible to sign/execute grant agreements [required to sign grant agreements assurances].

A list of current HAHSTA sub-grantees with valid assurance packages on file with HAHSTA will be available for review at the pre-application conference. Current sub-grantees who do not attend the pre-application conference may contact their grant monitor after the conference to review the list of their valid assurance packages on file. Organizations with confirmed valid assurance package on file will not be required to submit additional information. Organizations without a confirmed valid assurance package on file will be required to submit the pre-application assurances listed below.

Assurances Required to Submit Applications (Pre-Application Assurances)

1. Attachment A -
2. A Current Business license, registration, or certificate to transact business in the relevant jurisdiction:
3. 501 (C) (3) Certification. For non-profit organizations
4. Current Certificate of Clean Hands (formerly “Certificate of Good Standing”)
5. List of Board of Directors
6. All Applicable Medicaid Certifications

It is recommended that the HAHSTA Assurance Packet is submitted to April Richardson at (202) 671-4900 by Tuesday, March 1, 2016 to allow for review and evaluation. Proposals from

organizations that do not have complete and current “Assurances Required to Submit Applications” will not be considered for funding. Applicants who submit assurances prior to the February 18, 2016 deadline should CONFIRM that the HAHSTA Assurance Packet has been listed as complete.

For contact and submission information see the “Application Submission” section.

Section IX. Grant Terms and Conditions

1. See APPENDIX A in this RFA for Standard DOH Terms and Conditions of Award.

All grants awarded under this program, shall be subject to the following terms and conditions:

2. Vendor Assurances, as applicable:

The organization shall submit and comply with all document requirements as determined by the District of Columbia Department of Health, HIV/AIDS, Hepatitis, STD, TB Administration. The following documents will be included for completion with the organization agreement:

- a. Vendor Oath and Certification;
- b. Certification of Assurance of Compliance Regarding Fair Labor Standards Act;
- c. Bidder/Offer or Affidavit and Statement of Ownership; and
- d. Corporate Acknowledgment - Whenever the DOH is contracting with a corporate entity or partnership, an acknowledgment must be executed in order to assure the DOH that the person signing the document on behalf of the entity has the authority to bind the entity to the terms and conditions of the agreement. This Corporate Acknowledgment must be notarized.

3. District of Columbia Regulatory Requirements

- a. Organizations seeking funding for Food Bank and Home Delivered Food (Meals or Groceries) services must include a copy of the current Food Permit issued by the Food Protection Division of District of Columbia or such appropriate designated division of the government with proposal.
- b. Organizations seeking funding for Child Care services are required to comply with the regulations set forth by the Day Care Licensing Division of District of Columbia. Organizations seeking funding in any service categories, that include work with children, are required to complete Criminal Background Investigations annually (conducted through local law enforcement agency) on all paid or volunteer service providers.
- c. Organizations employing or contracting with Health Care Professionals licensed under Health Occupations Code must include copies of the appropriate jurisdictional licenses with grant proposals.

4. Confidentiality

The applicant must demonstrate that they will protect the identity of those HIV infected persons receiving services. All records and other identifying information will be maintained in a secure place. The purpose of confidentiality is to protect persons by minimizing disclosure of information about them. Any breach of this policy is liable for civil penalty damage.

All Covered Entities and Business Associates (as defined by the HIPAA Privacy Standards) must comply with HIPAA.

5. Quality Improvement

The organization will agree to participate in Quality Improvement activities and record review processes established by the Grantee, the District of Columbia Department of Health.

6. Client Satisfaction and Grievance Procedure

The organization will agree to maintain and disseminate information regarding the client grievance process and will provide a mechanism for assessing client satisfaction with services annually.

7. During the term of the grant, organizations are required to obtain and maintain all hardware, software and training necessary to collect and report all data via CAREWare or data collection tools provided by or approved by HAHSTA.

Attachments and Appendices HSG_FBHS02.17.16

[Attachment A: RFA Checklist](#)

[Attachment B: Assurances Checklist](#)

[Attachment C: Applicant Profile](#)

[Attachment D: Client Summary](#)

[Attachment E: Linkages Summary](#)

[Attachment F: Other Sources of Funding](#)

[Attachment H: Budget and Budget Narratives](#)

[Attachment I: Notice of Intent to Apply](#)

[Attachment J: Application Receipt](#)

[Attachment L: Receipt for Assurances](#)

[Attachment M: Capacity to Provide Culturally Competent Services](#)

[Attachment N: Medicaid Eligibility Chart](#)

[Attachment O: Grantee Assurances, Certifications and Mandatory Disclosure Statement](#)

[Attachment P: Federal Assurances](#)

[Attachment Q: DOH Assurances](#)

[Attachment R: Tables for Rate Calculation](#)

Attachment A: RFA Checklist

Applicant Agency:	
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Note: Use this name for “(applicant agency)” as indicated for each application element below

Application Element	Format	File Name
		HAHSTA_HSG_FBHS02.17.16 (for copy submitted on Jump Drive No CD's)
1. Attachment J: Application Receipt	MS Word	Attachment J: Application Receipt (<i>applicant agency</i>) Note: Attach one original and one copy of the Application Receipt – behind the Applicant Profile -- to the outside of the “original” Application Package only.
2. Attachment C: Applicant Profile	MS Word	Attachment C: Applicant Profile (<i>applicant agency</i>) Note: Attach the Applicant Profile to the outside of each envelope
3. Table of Contents	MS Word	Table of Contents (<i>applicant agency</i>)
4. Abstract	MS Word	Abstract (<i>applicant agency</i>)
5. Population(s) to be Served and Need	MS Word	Populations and Need (<i>applicant agency</i>)
6. Organizational Capacity	MS Word	Organization Capacity (<i>applicant agency</i>)
7. Program Plan	MS Word	Program Plan (<i>service category</i>) (<i>applicant agency</i>)
8. Budget and Budget Narrative	MS Excel	Budget and Budget Narrative (<i>service category</i>) (<i>applicant agency</i>)
9. Attachment R: Tables for Rate Calculation	MS Excel	Rate Calculation (<i>service category</i>) (<i>applicant agency</i>)
10. Attachments		
• Attachment D: Client Summary	MS Word	Attachment D Client Summary (<i>applicant agency</i>)
• Attachment E: Linkages Summary	MS Word	Attachment E Linkages Summary (<i>applicant agency</i>)

<ul style="list-style-type: none"> Attachment F: Other Sources of Funding Table 	MS Word	Attachment F Sources of Funding (<i>applicant agency</i>)
<ul style="list-style-type: none"> Attachment M: Capacity to Provide Culturally Competent Services 	MS Word	Attachment M Cultural Competency (<i>applicant agency</i>)
<ul style="list-style-type: none"> Attachment N: Medicaid Eligibility Chart (if applicable) 	MS Word	Attachment N Medicaid Eligibility (<i>applicant agency</i>)
<ul style="list-style-type: none"> Attachment O: Certification, Lobbying, et al. 	MS Word	Attachment O: Certifications (<i>applicant agency</i>)
<ul style="list-style-type: none"> Attachment P: Federal Assurances (DOH) 	MS Word	Attachment P: Assurances (DOH) (<i>applicant agency</i>)
<ul style="list-style-type: none"> Attachment Q: DOH Statement of Certification 	MS Word	Attachment Q: Certifications (DOH) (<i>applicant agency</i>)

Notes:

- Applicants submit
 - One original of the application package, marked “Original” on the outside of the envelope.

The original application package will have Attachment J: Application Receipt (one original and one copy) attached to the outside of the original application package only.

 - Three printed copies of the application package for which the applicant is applying.
 - One copy of the application package on a jump drive marked “Jump Drive” on the outside of the envelope.
- Printed copies of the application package are on 8½ by 11-inch white paper, “Portrait” page orientation, double-spaced, one-sided, using a font size with no more than twelve characters per inch and with a minimum of one inch margins. Applications that do not conform to these requirements will not be forwarded to the review panel.
- The application is unbound and submitted with rubber bands or binder clips only.

Assurance package submission checklist items:

- All Certifications, Licenses and Assurances all of the items listed on the Assurance Checklist, are complete and are included in the assurance package.
- The two (2) sets of assurance packages are submitted with; one (1) marked “original” and one (1) marked “copy”.
- The assurances are submitted with two completed original assurance receipts. Assurance receipts should be affixed to the outside of the original envelope for submission to HAHSTA.

Attachment B: Assurances Checklist

Applicant Agency:	
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Certifications, Licenses and Assurances Required for Submitting Application to RFA#_ HSG_FBHS02.17.16

Applicants are required to submit **one** copy of certifications, affidavits, and assurances in a sealed envelope. The assurance checklist found below should be completed and placed in the envelope of each packet. The outside of each envelope must be conspicuously marked as follows:

1. Assurances in response to RFA#_ HSG_FBHS02.17.16
2. Indicate whether content is "original" or "copy."

ASSURANCE CHECKLIST

- ☐ 1. Signed DOH Assurances, Certifications and Mandatory Disclosures
 - DOH Statement of Certification
 - Certifications Regarding, Lobbying, Debarment and Suspension, Other Responsibility Matters, and Requirements for a Drug-Free Workplace
 - Federal Assurances
- ☐ 2. Current Business License, registration to transact business in the relevant jurisdiction Department of Consumer and Regulatory Affairs (DCRA) (DCRA is for the DC based providers)
1100- 4th Street, S.W. Contact 202-442-4400
Or www.dcrd.dc.gov
- ☐ 3. Current Certificate of Clean Hands (formerly Certificate of Good Standing) DC Office of Tax & Revenue (OTR) (You can only apply for this on line. It takes at least 7 days but no more than 14 days) 1101 4th Street SW
Washington, DC 20024
Contact Person: Rhonda Lycorish; Phone: (202) 442-6815
- ☐ 4. 501 (C) (3) Certification. For non-profit organizations
- ☐ 5. List of Board of Directors, on letterhead, for current year, signed and dated by a certified official from the Board.(This Cannot be the Executive Director)
- ☐ 6. All Applicable Medicaid Certifications

It is the Responsibility of the Applicant to determine the extent to which the services proposed are reimbursable by Medicaid in each relevant jurisdiction. It is also the responsibility of the applicant to submit documentation of certification to bill and collect revenue from Medicaid in each jurisdiction which Medicaid reimbursement is available.

Attachment C: Applicant Profile

Applicant Agency:	
TYPE OF ORGANIZATION:	<input type="checkbox"/> Non-Profit Organization <input type="checkbox"/> For-Profit Organization <input type="checkbox"/> Other
DUNS NUMBER:	
Tax ID #:	
Contact Person:	
Title:	
Street Address:	
City, State ZIP:	
Telephone:	
Fax:	
Email Address:	
Ward:	
Organization Web-site:	
Names of Organization Officials	
Board Chair:	
Board Treasurer:	
Chief Executive Officer:	
Chief Financial Officer:	

Service Category(ies) Requesting (Check all that apply)	Funding Requested
<input type="checkbox"/> Category A: Facility-Based Housing (Emergency)	
<input type="checkbox"/> Category B: Facility-Based Housing (Transitional)	
<input type="checkbox"/>	
<input type="checkbox"/>	
TOTAL Requested	

Signature of Authorized Official: _____

Attachment D: Client Summary

Applicant:

Part 1: Provide information about the people your organization served (“Current”) and the people your organization proposes to serve.

For “Current” clients, the form requests the number of clients served during the twelve months beginning October 1, 2014. Your organization may use a different, recent twelve-month period for convenience and accuracy, and should change the dates on the form to indicate the time period.

For each data element requested for “Current” clients, provide the actual data if available, or an estimate if the data are not available.

Part 1: Summary of Clients			
	Current		Proposed
	Actual	Estimate	
1. Number of unique clients your organization serves. Include all clients (HIV-positive and HIV-negative) and all services.			
2. Number of unique clients with HIV your organization serves. Include all services.			
3. Of the total in Question 2 , how many clients were			
a. Male			
b. Female			
c. Transgender (Male → Female)			
d. Transgender (Female → Male)			
Total for Question 3			
4. Of the total in Question 2 , how many clients were			
a. African American or Black			
b. White			
c. Asian			
d. American Indian or Alaska Native			
e. Native Hawaiian or other Pacific Islander			
f. Unknown			
Total for Question 4			
5. Of the total in Question 2 , how many clients were			
a. Hispanic			
b. Non-Hispanic			
c. Other			
d. Unknown			
Total for Question 5			
6. Of the total in Question 2 , how many clients were			
a. Residents of Ward 1			
b. Residents of Ward 2			

Part 1: Summary of Clients			
	Current		Proposed
	Actual	Estimate	
c. Residents of Ward 3			
d. Residents of Ward 4			
e. Residents of Ward 5			
f. Residents of Ward 6			
g. Residents of Ward 7			
h. Residents of Ward 8			
i. Other or Unknown			
Total for Question 6			
11. Of the total in Question 2 , how many clients			
a. Were ever AIDS-defined			
12. Of the total in Question 2 , how many clients are taking ARV?			
a. Of clients in Question 12 , the total number who have a CD4 greater than 500 (as of the last reporting period)			
b. Of clients in Question 12 , the total number who have a CD4 from 200-500 (as of the last reporting period)			
c. Of clients in Question 12 , the total number who have a CD4 count below 200 (as of the last reporting period)			
d. Of clients in Question 12 , the total number who are virally suppressed (viral load below 200)			
13. What percentage of were lost to ambulatory outpatient medical care in the twelve month period?			

Note: Provide a brief narrative explanation of any use of “estimates,” along with a brief description of your organization’s plan to improve data collection and reporting.

--

Attachment E: Linkages Summary

Instructions

1. Applicants must complete Attachment E to detail their ability to assure a continuum of care.
For all applicants that are awarded, the information on the attached table will be verified and monitored.
2. Applicants should pay particular attention to the specific linkage requirements noted for each service category in the service category descriptions section. If a linkage is not required, please indicate “NA” (for not applicable) in the space provided.
3. Applicants may use additional sheets to list linkages if necessary.
4. Column 1 lists the various service categories funded by HAHSTA.
5. In Column 2, applicants should place a check mark in the space provided if they provide or propose to provide that service directly. If they do not provide the service directly, leave the space blank.
6. In Column 3, applicants should list both Ryan White funded and non-Ryan White funded organizations with whom they have collaborative agreements and linkages for the given service categories.
7. In column 4, the applicant should type “yes” or “no,” indicating whether or not there is an established Memorandum Of Understanding/Agreement (MOU/A) with the listed agency or individual.
8. In column 5, the applicant should type “yes” or “no,” indicating whether or not there is an established contract with the listed agency or individual.

Linkages Summary

Applicant Agency:				
Service Category	Provide Directly	Provide Through Linkage (Name Organizations)	Established MOU/A (Yes/No)	Signed Contract (Yes/No)
1. Outpatient Ambulatory Medical Care				
2. AIDS Drug Assistance Program (ADAP)				
3. AIDS Pharmaceutical Assistance (local)				
4. Oral Health Care				
5. Early Intervention Services				
6. Health Insurance Premium and Cost Sharing				
7. Home Health Care				
8. Home and Community-Based Health Services				
9. Hospice Services				
10. Mental Health Services				
11. Medical Nutrition Therapy				
12. Medical Case Management				
13. Substance Abuse Services				
14. Case Management (non-Medical)				
15. Childcare Services				
16. Pediatric Development Assessment and Early Intervention Services				
17. Emergency Financial Assistance				

Applicant Agency:				
Service Category	Provide Directly	Provide Through Linkage (Name Organizations)	Established MOU/A (Yes/No)	Signed Contract (Yes/No)
18. Food Bank/Home Delivered Meals				
19. Health Education/Risk Reduction				
20. Housing Services				
21. Legal Services				
22. Linguistic Services				
23. Medical Transportation Services				
24. Outreach Services				
25. Permanency Planning				
26. Psychosocial Support Services				
27. Referral for Healthcare/supportive Services				
28. Rehabilitation Services				
29. Respite Care				
30. Substance Abuse Services (residential)				
31. Treatment Adherence Counseling				

Attachment F: Other Sources of Funding

Applicant Agency:	
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Instructions:

Use Attachment F to provide information on the services provided by the applicant organization and the sources of funding that support those services. The information used in Attachment E should be current and correct as of January 1, 2016.

In the first column, list each service category eligible for funding under this RFA that the applicant organization provided as of January 1, 2016.

For each service category, provide the annual, twelve-month funding used by the applicant organization to support each service category as of January 1, 2016.

Attachment F: Other Sources of Funding as of January 1, 2016

[illegible]

Attachment H: Budget and Budget Narratives

Applicant Agency:	
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All Applicants applying for services must use the HAHSTA approved budget form. The form is located and can be downloaded at the following website

http://doh.dc.gov/doh/frames.asp?doc=/doh/lib/doh/services/administration_offices/hiv_aids/pdf/budget_format_attachment_mandatory.xls

There can not be any changes made to the format or content areas of the Excel workbook. Applicants must input budget projections for each project description submitted.

Attachment I: Notice of Intent to Apply

Please submit this Notice of Intent to Apply fax to Sherita Grant at Sherita.grant@dc.gov or 202/671-4860. Notices will also be accepted at the pre-application conference.

RFA#_ HSG_FBHS02.17.16

Applicant Name	
Mailing Address	
City, State, Zip	
Contact Person Name and Title	
E-mail	
Phone	

My organization intends to apply for the service categories listed under Request for Application RFA#_ HSG_FBHS02.17.16

I understand that the application package will include a Program Plan, Budget and Budget Narrative for each service category for which my organization applies.

- ☐ Category A: Facility-Based Housing (Emergency)
- ☐ Category B: Facility-Based Housing (Transitional)

Signature

Date

Attachment J: Application Receipt

RFA#_ HSG_FBHS02.17.16

Date/Time Stamp

Applicant Name and Address				
Applicant Representative	Name and Title			
	Phone:		Fax:	
	E-Mail:			
Service Category			Amount Requested	
Category A: Facility-Based Housing (Emergency)			\$	
Category B: Facility-Based Housing (Transitional)			\$	
TOTAL			\$	

This certifies that one (1) “original,” three (3) printed copies and one copy on a jump drive the application and attachments were received by the District of Columbia Department of Health, HIV/AIDS, Hepatitis, STD and Tuberculosis Administration (HAHSTA)

Received by: _____

(Signature of DOH Staff)

AFFIX TO “ORIGINAL” APPLICATION PACKAGE(s)

Attachment L: Receipt for Assurances

Applicant Agency:	
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Date/Time Stamp:

Request for Application #HSG_FBHS02.17.16

Instructions: Complete and sign the form below. Submit **the original and one copy** of each document with the assurance package.

Assurances

1. Signed DOH and Federal Assurances, Certifications and Mandatory Disclosures
2. Current Business License, registration to transact business in the relevant jurisdiction
3. Current Certificate of Clean Hands (formerly Certificate of Good Standing)
4. 501 (C) (3) Certification. For non-profit organizations
5. List of Board of Directors, on letterhead, for current year, signed and dated by a certified official from the Board.(This Cannot be the Executive Director)
6. All Applicable Medicaid Certifications

Assurances Delivered by

(Please Print Name)

Signature

This certifies that one (1) original plus one copy of the items listed above were delivered to the District of Columbia Department of Health

Assurances Received by

(Please Print Name)

Signature

Attachment M: Capacity to Provide Culturally Competent Services

RFA#_ HSG_FBHS02.17.16

Applicant Agency:	
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Instructions

This table, in addition to the narrative project description, should describe an applicant's ability to directly provide culturally appropriate services to clients or to provide culturally appropriate services through referral and linkage.

1. Attachment M should be completed for each application.
2. Include information on direct service staff only. Do not include information on administrative support staff or management staff.
3. In Column 1, list the characteristics of your direct service staff for a given service category. Use the "Other" row to indicate specific cultural characteristics such as sexual orientation, youth and adolescence, hemophilia, sign language interpretation, etc.
4. In Column 2, list the number of direct staff and percent of direct staff with that characteristic.
5. In Column 3, list the specific cultural skills those staff have i.e., languages they speak, targeted population they serve, etc.
6. In Column 4, list the consultants or linkages you use to enhance the availability of culturally appropriate services

Sample

Applicant Name: Mental Health Community Based Organization, Inc.

CHARACTERISTIC	NUMBER / PERCENT OF DIRECT SERVICE STAFF	DESCRIPTION OF CULTURAL SKILLS	NAME OF CONSULTANTS AND LINKAGE ORGANIZATIONS
Race / Ethnicity (Please list) African American Latino White	4 (100%)	<ul style="list-style-type: none"> 25% of staff is bilingual (English/Spanish) 1 Staff member knows American Sign Language (ASL) 	Linkage with ABC Health, Inc. for Latino clients. Linkage with XYZ Clinic for gay/bisexual white males. Linkage with QRS County Health Dept., Division of Mental Health Services.
Gender (Please List) Male Female	1 (25%) 3 (75%)		

ATTACHMENT M: Capacity to Provide Culturally Competent Services

Applicant Name: _____

Service category: _____

CHARACTERISTIC	NUMBER / PERCENT OF DIRECT SERVICE STAFF	DESCRIPTION OF CULTURAL SKILLS	NAME OF CONSULTANTS AND LINKAGE ORGANIZATIONS
Race / Ethnicity (Please list)			
Gender (Please List)			

Attachment N: Medicaid Eligibility Chart

Organizations funded to provide one or more services that are reimbursable by Medicaid are required to

- ☐ Screen clients for Medicaid eligibility
- ☐ Assist clients to enroll in Medicaid
- ☐ Bill Medicaid for all Medicaid-included services provided to Medicaid-eligible clients
- ☐ Collect and report Medicaid revenue as “program income.”

This attachment is required only of applicants that include in their proposals a request for funding Substance Abuse Services within Category C: Supportive Services.

Instructions

1. Column 1 lists the various service categories funded under this RFA
2. In Column 2 list the Medicaid number used by the organization to bill for Medicaid. In the event of multiple provider numbers, list the number most frequently used.
3. In Column 3, indicate by “yes” or “no” whether the organizations is authorized to bill for the particular service category.
4. In Column 4, applicants should list the name of the Medicaid Managed Care Organizations (MCO) with which they participate for the particular service category.

Attachment N: Medicaid Eligibility

Applicant Agency:			
Service Category	Medicaid Number	Authorized to Bill for Services (Yes / No)	MCO Participation
Substance Abuse Services			

Attachment R: Tables for Rate Calculation

Step 1.

Component	Amount
Occupancy	
Rent	\$
Mortgage	\$
Depreciation	\$
Utilities	\$
Facility Maintenance & Repairs	\$
Housing Supplies (bedding and linens)	\$
Furniture repair, depreciation, replacement	
Purchase or Replacement	\$
Repair and Maintenance	\$
Security	\$
Facility Cost	\$

Step 2.

Component	Square Footage	Proportion
Housing Space		
Client Private Space		%
Shared Living Space		%
Shared Dining Space		%
Shared Kitchen Space		%
Shared Laundry Space		%
Other		%
Housing Space (Subtotal)		%
Non Housing Space		%
Administrative		%
Staff Office		%
Supportive Services		%
Other		%
Non Housing Space (Subtotal)		%
Facility Space Total		%

Step 3.

	Facility Cost	Housing Space (Subtotal) Proportion	Facility-Based Housing Cost
<i>Note</i>	<i>Calculated in Step 1</i>	<i>Calculated in Step 2</i>	<i>Multiply Facility Cost by Facility-Based Housing Proportion</i>
<i>Example</i>	<i>\$160,000</i>	<i>75%</i>	<i>\$120,000</i>
	\$	%	\$

Step 4.

	Facility-Based Housing Cost	Housing Slots	Minimum Rate
<i>Note</i>	<i>Calculated in Step 3</i>		<i>Divide Facility-Based Housing Cost by Housing Slots</i>
<i>Example</i>	<i>\$120,000</i>	<i>10</i>	<i>Per Year: \$12,000 Per Month: \$1,000 Per Night: \$33.33</i>
	\$		Per Year: \$ Per Month: \$ Per Night: \$

Step 6.

	Minimum Rate	Capacity Adjustment	Adjusted Rate
<i>Note:</i>	<i>Calculated in Step 4</i>	<i>See above</i>	<i>Divide Minimum Rate by 90%, Multiply by 100%</i>
<i>Example:</i>	<i>\$ 33.33</i>	<i>90%</i>	<i>\$ 37.03</i>

ATTACHMENT O: APPLICANT / GRANTEE ASSURANCES, CERTIFICATIONS & DISCLOSURES

his section includes certifications, assurances and disclosures made by the authorized representative of the Applicant/Grantee organization. These assurances and certifications reflect requirements for recipients of local and pass-through federal funding.

A. Applicant/Grantee Representations

1. The Applicant/Grantee has provided the individuals, by name, title, address, and phone number who are authorized to negotiate with the Department of Health on behalf of the organization;
2. The Applicant/Grantee is able to maintain adequate files and records and can and will meet all reporting requirements;
3. All fiscal records are kept in accordance with Generally Accepted Accounting Principles (GAAP) and account for all funds, tangible assets, revenue, and expenditures whatsoever; all fiscal records are accurate, complete and current at all times; and these records will be made available for audit and inspection as required;
4. The Applicant/Grantee is current on payment of all federal and District taxes, including Unemployment Insurance taxes and Workers' Compensation premiums. This statement of certification shall be accompanied by a certificate from the District of Columbia OTR stating that the entity has complied with the filing requirements of District of Columbia tax laws and is current on all payment obligations to the District of Columbia, or is in compliance with any payment agreement with the Office of Tax and Revenue; (attach)
5. The Applicant/Grantee has the administrative and financial capability to provide and manage the proposed services and ensure an adequate administrative, performance and audit trail;
6. If required by DOH, the Applicant/Grantee is able to secure a bond, in an amount not less than the total amount of the funds awarded, against losses of money and other property caused by a fraudulent or dishonest act committed by Applicant/Grantee or any of its employees, board members, officers, partners, shareholders, or trainees;
7. The Applicant/Grantee is not proposed for debarment or presently debarred, suspended, or declared ineligible, as required by Executive Order 12549, "Debarment and Suspension," and implemented by 2 CFR 180, for prospective participants in primary covered transactions and is not proposed for debarment or presently debarred as a result of any actions by the District of Columbia Contract Appeals Board, the Office of Contracting and Procurement, or any other District contract regulating Agency;
8. The Applicant/Grantee either has the financial resources and technical expertise necessary for the production, construction, equipment and facilities adequate to perform the grant or subgrant, or the ability to obtain them;
9. The Applicant/Grantee has the ability to comply with the required or proposed delivery or performance schedule, taking into consideration all existing and reasonably expected commercial and governmental business commitments;

10. The Applicant/Grantee has a satisfactory record of performing similar activities as detailed in the award or, if the grant award is intended to encourage the development and support of organizations without significant previous experience, has otherwise established that it has the skills and resources necessary to perform the services required by this Grant.
11. The Applicant/Grantee has a satisfactory record of integrity and business ethics;
12. The Applicant/Grantee either has the necessary organization, experience, accounting and operational controls, and technical skills to implement the grant, or the ability to obtain them;
13. The Applicant/Grantee is in compliance with the applicable District licensing and tax laws and regulations;
14. The Applicant/Grantee is in compliance with the Drug-Free Workplace Act and any regulations promulgated thereunder; and
15. The Applicant/Grantee meets all other qualifications and eligibility criteria necessary to receive an award; and
16. The Applicant/Grantee agrees to indemnify, defend and hold harmless the Government of the District of Columbia and its authorized officers, employees, agents and volunteers from any and all claims, actions, losses, damages, and/or liability arising out of or related to this grant including the acts, errors or omissions of any person and for any costs or expenses incurred by the District on account of any claim therefrom, except where such indemnification is prohibited by law.

B. Federal Assurances and Certifications

The Applicant/Grantee shall comply with all applicable District and federal statutes and regulations, including, but not limited to, the following:

1. The Americans with Disabilities Act of 1990, Pub. L. 101-336, July 26, 1990; 104 Stat. 327 (42 U.S.C. 12101 et seq.);
2. Rehabilitation Act of 1973, Pub. L. 93-112, Sept. 26, 1973; 87 Stat. 355 (29 U.S.C. 701 et seq.);
3. The Hatch Act, ch. 314, 24 Stat. 440 (7 U.S.C. 361a et seq.);
4. The Fair Labor Standards Act, ch. 676, 52 Stat. 1060 (29 U.S.C. 201 et seq.);
5. The Clean Air Act (Subgrants over \$100,000), Pub. L. 108-201, February 24, 2004; 42 USC ch. 85 et seq.);
6. The Occupational Safety and Health Act of 1970, Pub. L. 91-596, Dec. 29, 1970; 84 Stat. 1590 (26 U.S.C. 651 et seq.);
7. The Hobbs Act (Anti-Corruption), ch. 537, 60 Stat. 420 (see 18 U.S.C. § 1951);
8. Equal Pay Act of 1963, Pub. L. 88-38, June 10, 1963; 77 Stat. 56 (29 U.S.C. 201);
9. Age Discrimination Act of 1975, Pub. L. 94-135, Nov. 28, 1975; 89 Stat. 728 (42 U.S.C. 6101 et seq.);
10. Age Discrimination in Employment Act, Pub. L. 90-202, Dec. 15, 1967; 81 Stat. 602 (29 U.S.C. 621 et seq.);
11. Military Selective Service Act of 1973;
12. Title IX of the Education Amendments of 1972, Pub. L. 92-318, June 23, 1972; 86 Stat. 235, (20 U.S.C. 1001);
13. Immigration Reform and Control Act of 1986, Pub. L. 99-603, Nov 6, 1986; 100 Stat. 3359, (8 U.S.C. 1101);
14. Executive Order 12459 (Debarment, Suspension and Exclusion);
15. Medical Leave Act of 1993, Pub. L. 103-3, Feb. 5, 1993, 107 Stat. 6 (5 U.S.C. 6381 et seq.);

16. Drug Free Workplace Act of 1988, Pub. L. 100-690, 102 Stat. 4304 (41 U.S.C.) to include the following requirements:
- 1) Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the Applicant/Grantee's workplace and specifying the actions that will be taken against employees for violations of such prohibition;
 - 2) Establish a drug-free awareness program to inform employees about:
 - a. The dangers of drug abuse in the workplace;
 - b. The Applicant/Grantee's policy of maintaining a drug-free workplace;
 - c. Any available drug counseling, rehabilitation, and employee assistance programs; and
 - d. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace; and
 - (3) Provide all employees engaged in performance of the grant with a copy of the statement required by the law;
17. Assurance of Nondiscrimination and Equal Opportunity, found in 29 CFR 34.20;
18. District of Columbia Human Rights Act of 1977 (D.C. Official Code § 2-1401.01 et seq.);
19. Title VI of the Civil Rights Act of 1964;
20. District of Columbia Language Access Act of 2004, DC Law 15 - 414 (D.C. Official Code § 2-1931 et seq.);
21. Lobbying Disclosure Act of 1995, Pub. L. 104-65, Dec 19, 1995; 109 Stat. 693, (31 U.S.C. 1352); and
22. Child and Youth, Safety and Health Omnibus Amendment Act of 2004, effective April 13, 2005 (D.C. Law §15-353; D.C. Official Code § 4-1501.01 et seq.)(CYSHA). In accordance with the CYSHA any person who may, pursuant to the grant, potentially work directly with any child (meaning a person younger than age thirteen (13)), or any youth (meaning a person between the ages of thirteen (13) and seventeen (17) years, inclusive) shall complete a background check that meets the requirements of the District's Department of Human Resources and HIPAA.

C. Mandatory Disclosures

1. The Applicant/Grantee certifies that the information disclosed in the table below is true at the time of submission of the application for funding and at the time of award if funded. If the information changes, the Grantee shall notify the Grant Administrator within 24 hours of the change in status. A duly authorized representative must sign the disclosure certification

2. Applicant/Grantee Mandatory Disclosures

A. Per OMB 2 CFR §200.501– any recipient that expends \$750,000 or more in federal funds within the recipient’s last fiscal, must have an annual audit conducted by a third – party. In the Applicant/Grantee’s last fiscal year, were you required to conduct a third-party audit?	<input type="checkbox"/> YES
	<input type="checkbox"/> NO
B. Covered Entity Disclosure During the two-year period preceding the execution of the attached Agreement, were any principals or key personnel of the Applicant/Grantee /	<input type="checkbox"/> YES

Recipient organization or any of its agents who will participate directly, extensively and substantially in the request for funding (i.e. application), pre-award negotiation or the administration or management of the funding, nor any agent of the above, is or will be a candidate for public office or a contributor to a campaign of a person who is a candidate for public office, as prohibited by local law.	<input type="checkbox"/> NO
C. Executive Compensation: For an award issued at \$25,000 or above, do Applicant/Grantee's top five executives <u>do not receive</u> more than 80% of their annual gross revenues from the federal government, Applicant/Grantee's revenues are greater than \$25 million dollars annually AND compensation information is not already available through reporting to the Security and Exchange Commission.	<input type="checkbox"/> YES
	<input type="checkbox"/> NO
<i>If No, the Applicant, if funded shall provide the names and salaries of the top five executives, per the requirements of the Federal Funding Accountability and Transparency Act – P.L. 109-282.</i>	
D. The Applicant/Grantee organization has a federally-negotiated Indirect Cost Rate Agreement. If yes, insert issue date for the IDCR: _____ If yes, insert the name of the cognizant federal agency? _____	<input type="checkbox"/> YES
	<input type="checkbox"/> NO
E. No key personnel or agent of the Applicant/Grantee organization who will participate directly, extensively and substantially in the request for funding (i.e. application), pre-award negotiation or the administration or management of the funding is currently in violation of federal and local criminal laws involving fraud, bribery or gratuity violations potentially affecting the DOH award.	<input type="checkbox"/> YES
	<input type="checkbox"/> NO

ACCEPTANCE OF ASSURANCES, CERTIFICATIONS AND DISCLOSURES

I am authorized to submit this application for funding and if considered for funding by DOH, to negotiate and accept terms of Agreement on behalf of the Applicant/Grantee organization; and

I have read and accept the terms, requirements and conditions outlined in all sections of the RFA, and understand that the acceptance will be incorporated by reference into any agreements with the Department of Health, if funded; and

I, as the authorized representative of the Grantee organization, certify that to the best of my knowledge the information disclosed in the Table: Mandatory Disclosures is accurate and true as of the date of the submission of the application for funding or at the time of issuance of award, whichever is the latter.

Sign:

Date:

NAME: INSERT NAME

TITLE: INSERT TITLE

AGENCY NAME:

TERMS AND CONDITIONS OF AWARD

This document outlines standard terms and conditions for any award issued by the District of Columbia Department of Health as a grant, subgrant or subaward whose fund source and authorization requires Grantor (DOH) and the Recipient to be in compliance with local and federal terms of Agreement and statutes for issuing and administering a subaward. The terms and conditions apply to both competitive and non-competitive awards in new or continuation status. Administrative units within DOH may apply additional terms and conditions of award based on the requirements of the funding, funding authorization or regulations required by federal or local statute for specific programs or types of services. Any reference herein to “this Agreement” or “the Agreement” applies to a fully executed Notice of Grant Award (NOGA) and Grant Agreement issued by DOH to a Grantee organization.

A. Award Authorization

1. The Grantee shall not start any activity or expend funds or request reimbursement for expenditures unless there is a fully executed Agreement and purchase order issued by DOH to the Grantee.
2. The start and end dates for the award shall be the Project Period Start Date indicated on the fully executed NOGA, unless amended by the Department of Health.
3. The Grantee shall provide services and conduct activities for the purpose established by the terms of the Agreement and the authorizing fund source, which is located on the NOGA and purchase order assigned to the award instrument.
4. DOH shall issue a Notice of Grant Award for each budget period, subject to satisfactory performance of the Grantee, Grantee eligibility and the availability of funding.
5. Grantee shall submit an overall budget, including a detailed line item budget for each service area and shall operate programs in accordance with a budget approved by the grant administrator/ delegate prior to the issuance of a NOGA.
6. This Agreement shall be subject to the availability of funding and an appropriation for the program or grant funding that is the subject of the grant. This Agreement shall be subject to termination at any time, in whole or in part, if adequate funds are not made available by DOH or appropriated by DOH for the program in question.
7. This Agreement shall be subject to termination at any time, in whole or in part, for the convenience of the government should DOH determine that such termination is in the best interest of the public or the government.
8. The Grantee must be eligible for funding at the time the award is issued and maintain eligibility as established by the terms of this Agreement, the Request for Applications

(RFA) and statutory requirements (local and/or federal).

9. The Grantee shall not utilize grant funds to supplant other funds, deliberately reducing or reallocating other grantee organizational funds due to the existence of funding available for this award.

B. Administrative Requirements

1. **Certifications, Assurances and Disclosures:** Prior to signing this Agreement, the Grantee shall have and maintain on file with DOH complete and current certifications and assurances of the following:
 - a) DOH Statement of Certification
 - b) Federal Assurances
 - c) Certifications Regarding Lobbying, Debarment, Suspension and Other Responsibility Matters; and Drug-Free Workplace Requirements
 - d) Proof of Insurance for: commercial general liability, professional liability, comprehensive automobile and worker's compensation.
 - e) Certificate of Occupancy
 - f) 501 (c) (3) Certification
 - g) DC Business License
 - h) Most recent audits and financial statements
 - i) Clean Hands Certificate from DC Office of Tax and Revenue
 - j) Certificate of Good Standing from the Office of Corporations
 - k) List of current Board of Directors on Agency Letterhead and signed by the authorized representative
 - l) DOH Disclosure Statement

2. Funds Control

The Grantee shall establish a system of accounting that ensures that funds awarded under the NOGA are not co-mingled with other fund sources. The Grantee is prohibited from co-mingling funds on either a program-by-program (i.e. same fund source as another NOGA) or on a project-by-project (i.e. same/similar service area) basis. Funds specifically budgeted and/or received for one project may not be used to support another. Where the Grantee's accounting system cannot comply with this requirement, the Grantee shall establish a system to provide adequate fund accountability for the funded project.

3. Budget and Work Plan

1. The Grantee shall submit to DOH for review and approval a detailed work plan, overall budget, and detailed line item budget for each service area funded under this Agreement.

2. Standard DOH work plan and budget forms must be utilized by the Grantee in accordance with instructions provided by the Grant Administrator or his/her agents.
3. Required Spending Plans, Use/Sources of Funds and Match Schedules (if applicable) for this award shall include:
 - I. Cost Allocation Plan - the Grantee shall submit to DOH for review and approval a cost allocation plan, providing information on all sources of funds used to support any line item in the proposed budget for any service area. DOH recommends that agencies create a single cost allocation plan that includes all line items for all DOH-funded grants and contracts.
 - II. Summary of Funding Sources –the Grantee shall submit to DOH a summary of funding sources in a format prescribed by DOH.
4. DOH shall reserve the right to approve or deny requests for modifications of the Work Plan and Budget within the first quarter of the budget period for this award. The Grantee shall not modify, revise or alter the work plan or budget without prior approval of the Grant Administrator and in accordance with the procedures assigned by the Grant Administrator.

4. **Staffing Plan**

Upon signing the Agreement, the Grantee shall have and maintain on file with DOH an approved staffing plan, and implement the funded program in accordance with requirements outlined in approved budgets, work plans and applications for the purposed established by the grant. Any revision or alteration of this plan must have prior approval by the Grant Administrator or his/her designee.

5. **Client Records** (If there are no client services provided under the terms of Agreement, the terms in Section [B.3](#) do not apply)

C. **Reporting Requirements**

1. The Grantee shall develop a plan and schedule for the provision of data collection, narrative and statistical reporting for activities funded under the terms of the Grant Agreement. Additional requirements for data collection, narrative reporting, performance specific to a given service program may be provided by the Grant Administrator.
2. Data Collection – The Grantee shall obtain and maintain all hardware, software and training necessary to collect and report all required client (if applicable), service and program data. Data shall be collected and submitted in formats and timelines provided by or approved by the Grant Administrator/delegates.
3. Narrative Report - Grantee will provide a brief monthly narrative report for each service

program supported under this Agreement using formats and timelines provided by or approved by the Grant Administrator or agents in accordance with the following terms:

- a) The narrative programmatic report must include a work plan status, indicating the extent to which established milestones have been accomplished during the reporting month, and identifying proposed revisions to the work plan to address problem areas.
- b) The narrative report will include:
 - i. Implementation progress to date
 - ii. Discussion of any challenges to service delivery, including plans for addressing them
 - iii. Any change in personnel supported by the grant in this service program
 - iv. A thorough description of any wait list for the service program, including the number of clients on the wait list, the average length of time for clients on the wait list and the longest period of time for any client currently on the wait list
 - v. A discussion of the reasons for any significant under- or over-expenditure of funds budget relative to expected expenditure to date for any line item in the budget, along with a plan to address the under- or over-expenditure
 - vi. Progress toward implementation of any corrective action plan that is open
 - vii. A summary of quality assurance measures conducted on the delivery of services
 - viii. Current contact information for each staff person supported by the Agreement, including name, title, mailing address, e-mail address and telephone number
 - ix. Request for technical assistance, if any

D. Fund Disbursement

- 1. DOH reserves the right to withhold any payment if the Grantee is found in non-compliance with the DOH Notice of Grant Award or the Grant Agreement, and fails to correct any deficiencies within a reasonable time frame as determined by DOH. DOH shall determine the extent of the payment to be withheld under this provision.
- 2. Deposit and Security of Funds - The Grantee shall account for and reimburse the District Government any interest earned on advance grant award payments no later than twenty (20) business days from the end of each DC Government Fiscal Year (September 30) and no later than thirty (30) business days after the expiration of the Agreement. All payments shall be made by check or money order made payable to the "D.C. Treasurer".
- 3. The Grantee shall submit expenditure reports and requests for payment in accordance with the terms and options outlined in Appendix D – Fund Disbursement Plan and Schedule.

E. Unusual Incidents

The Grantee shall report unusual incidents by fax, telephone or electronic mail to the Grant Administrator within twenty-four (24) hours of the event, and in writing within five (5) days after the event. An unusual incident is an event that affects staff (District employees or Grantee's staff), contactors, or clients, which is significantly different from the regular routine or established procedures. Examples include: unusual injury or death; unexplained absence of a client from a residence or program; physical, sexual, or verbal abuse of a client by staff or other clients; fire, theft, destruction of property, or sudden serious problems in the physical plant; complaints from families or visitors of clients; requests for information from the press, attorneys, or government officials outside of DOH; client behavior(s) requiring attention of staff not usually involved in their care; and/or any other unusual events that may require Grant Administrator intervention.

F. Standard Operating Requirements

1. Staffing:

- a) The Grantee shall maintain a current organizational chart, which displays organizational relationships and demonstrates who has responsibility for administrative oversight and supervision over each priority service activity.
- b) The Grantee shall ensure that adequate, competent and trained personnel are provided to oversee the implementation of the activities supported by the grant.
- c) The Grantee shall ensure that personnel records, including job descriptions, application for employment, licensing or certification criteria, descriptions of duties, hours of work, salary range and performance evaluation criteria are maintained in individual personnel records for staff assigned to the funded project.
- d) The Grantee must maintain record of personnel actions, including time records, documentation of all training received, notation of any allegations of professional or other misconduct and Grantee action with respect to allegations and date and reason if the employee is terminated from employment. All these personnel materials shall be made available to the Grant Administrator upon request.
- e) The Grantee shall provide orientation session for staff members with respect to administrative procedures, program goals, cultural sensitivity, conflict of interest and policies and procedures to be adhered to under the terms of the grant Agreement.
- f) The Grantee must notify the DOH Grants Administrator in the instance that there is a change in staffing or operations management of the organization and the project funded under the Agreement.
- g) The Grantee shall seek approval of any changes in staffing plans or job descriptions for staff assigned to the grant.

2. Facilities

- a) Regulations - The Grantee's facilities used during the performance of the Agreement shall meet all applicable federal, state, and local regulations for their intended use throughout the duration of the Agreement. The Grantee shall maintain, current all required permits and licenses for the facilities. The Grantee's failure to do so shall constitute a failure to perform the Agreement and shall constitute an Event of Default.
- b) Emergency Back Up Site - The Grantee shall assure that an emergency site facility has been identified should the primary facility become unavailable for use as a result of a catastrophic event.
- c) Disabilities Access - All facilities offered for the provision of services under the Agreement shall be accessible to persons with mobility limitations, consistent with the Rehabilitation of the Handicapped Act, P.L. 95-602 (Section 504), and the Americans with Disabilities Act, P.L. 101-336, as appropriate, which are incorporated by reference.
- d) Maintenance - All supplies and services routinely needed for maintenance and operation of the facility, such as security, janitorial services, or trash pick-up, shall be provided by the Grantee

3. Insurance

During the Term of this Agreement, Grantee shall maintain the following types of insurance and comply with the following requirements:

- a) General Requirements. Grantee shall procure and maintain, during the entire period of the Agreement, the types of insurance specified below. Grantee shall have its insurance broker or insurance company submit to the District certificates of insurance and copies of the declarations pages evidencing all of the required coverage prior to performance under this Agreement. All insurance shall be written with financially responsible companies authorized to do business in the District of Columbia or in the jurisdiction where the work is to be performed (if applicable) and have an A.M. Best Company rating of A-VIII or higher. Grantee shall require all of its sub-grantees (if applicable) and agents to carry the same insurance required herein. The Grantee shall ensure that all policies provide that DOH shall be given thirty (30) days prior written notice in the event the stated limit in the declaration page of the policy is reduced via endorsement or the policy is canceled prior to the expiration date shown on declarations pages. Grantee shall provide the District with ten (10) days prior written notice in the event of non-payment of premium. All insurance provided by the Grantee as required by this section, except comprehensive automobile liability and workman's compensation insurance, shall set forth the District of Columbia as an additional insured.
- b) Commercial General Liability Insurance. Grantee shall provide evidence satisfactory to

DOH with respect to the services performed that it carries the following commercial general liability insurance: \$1,000,000 per occurrence limits and \$2,000,000 aggregate; Bodily Injury and Property Damage (including but not limited to Premises-operations), broad form property damage, Products and Completed Operations, Personal and Advertising Injury, and contractual liability and independent contractors coverage. Such policies shall be primary and non-contributory with any other insurance maintained by the District of Columbia, and shall contain a waiver of subrogation.

- c) Automobile Liability Insurance. Grantee shall provide automobile liability insurance to cover all owned, hired or non-owned motor vehicles used in conjunction with the performance of this contract. The policy shall provide a \$1,000,000 per occurrence combined single limit for bodily injury and property damage.
- d) Workers Compensation Insurance. The Grantee shall carry workers' compensation insurance covering all of its employees upon the premises and in connection with its other operations pertaining to this grant. The Grantee shall comply at all times with the provisions of the workers' compensation laws of the District of Columbia or another State if the grant work is performed outside the District of Columbia.
- e) At its option, the Grantee may maintain the above stated minimum levels of insurance through a self-insurance plan. Should this option be exercised, the Grantee is relieved of responsibility to comply with paragraph F of this Article; however, the Grantee shall certify in writing to the Grant Administrator/ his or her agent that coverage is maintained through a self-insurance plan.

4. Equipment - With any property Purchased with Grant Funds, the Grantee shall:

- a) Within 60 days of execution of the award, provide the Grant Administrator with an inventory of all equipment and supplies with a purchase price exceeding \$5,000 (per item) purchased with grant funds.
- b) For all property subsequently purchased or acquired, the Grantee shall maintain an inventory showing: (a) purchase price; (b) grant number; (c) name of item; (d) manufacturer's name; (e) serial number (if possible); (f) acquisition document reference; (g) guarantee or warranty lapse date; (h) location; (i) unit price; (j) additional costs (if any) for transportation, installation, and taxes (each as a separate item).
- c) The inventory shall be updated annually or at the expiration of the grant, whichever occurs first. The District shall have the right to inspect and reclaim all or part of such equipment upon expiration of the grant.
- d) All equipment and products purchased above \$5,000 with grant funds should be American-made when possible.
- e) Maintain electronic (email) capabilities.

5. Accounting and Audits

- a) The Grantee shall maintain an accounting system which conforms to generally accept accounting principles permitting an audit of all income and expenditures received or disbursed by the Grantee in the provision of services under this grant. Accounting records shall be supported by source documentation such as canceled checks, paid bills and payrolls.
- b) The Grantee shall make provisions, upon request, for inspection of financial records, including audited financial statements and tax returns, by DOH and/or its representative(s).
- c) At any time or times before final payment and three (3) years thereafter, the D.C. DOH may have the Grantee's expenditure statements audited. Disallowance and repayments shall be subject to the provisions of the federal or local fund sources and regulations governing cost principles and audit.
- d) The Grantee shall provide a copy of its independent audit conducted in accordance with 2 CFR 200 (as of December 26, 2014) and OMB Circular A-133.
- e) Any expenditure disallowed by the audit or other DOH reviewer shall be subject to repayment by the Grantee.

6. Transition Plan for Continuity of Services – It is essential that continuity of services be maintained under this Grant for the residents of the District of Columbia and applicable jurisdictions. Therefore, in the event that the awarded grant expires or is terminated:

- a) The Grantee shall cooperate with both the Grant Administrator, and any successor Grantee to enable an efficient transition of services to another provider.
- b) A transitional plan must be developed and available for review by DOH Administrative Unit within forty-five (45) days after the signing of this Agreement by the Grantee. Failure to provide this contingency plan will be deemed as an Event of Default and could result in the termination of this Grant.
- c) In the event that the Grantee is de-funded for a successive grant period or should cessation of services occur for any reason, the Grantee is required to develop a transition plan to ensure the appropriate referral of clients, if applicable, to other providers.
- d) An acceptable transition plan will include but not be limited to the following:
 - I. The identity of providers and or resources to ensure continued health care for those clients who receive services funded by this grant. These resources will be programs that are DOH approved;

- II. A contingency plan with those identified entities specifically stating what services will be provided; and
- III. If applicable, procedures for transfer of client services to include: Notification to the client; contact information of the receiving provider organization that the client is being transferred to; effective date of transfer; case summary reports to receiving provider organization; method to ensure continuity of client care, treatment and support services; transfer of client files in accordance with Federal and District of Columbia laws and regulations related to privacy and confidentiality of client records.

7. Awarding of Funds / Subcontracting

- a) All procurement transactions, whether negotiated or competitively bid and without regard to dollar value, shall be conducted in a manner so as to provide maximum open and free competition. Grantee will not execute any sole source procurement/grant award over \$10,000 or fund unsolicited applications without the approval of the Grant Administrator.
- b) When using DOH or federal pass-through funds, Grantee will establish a fair, open, transparent competitive process for the awarding of funds either through a contract, cooperative Agreement or grant instruments. A competition is a process that provides for the following:
 - I. Notice of Funding has been publicized;
 - II. Applications are easily available to all prospective applicants;
 - III. Applications are reviewed in an objective manner against an established public scoring criteria; and
 - IV. Reviewers have no conflict of interest with any of the submitting applicant organizations.
- c) Funds disbursed in a non-competitive manner may be disallowed and appropriate grant management sanctions issued.
- d) Grantee will submit for approval any Requests for Proposal or Requests for Applications before released.
- e) Grantee will submit for approval the unsolicited grant submission process before it is announced.

8. Program Close-out

- a) The Grantee shall submit to the Grant Administrator, a final Programmatic Report no later than 30 days after expiration of the Grant Agreement.

- b) The Grantee shall submit to the Grant Administrator, a final Financial Report within 30 days of the termination/end of the Grant, providing a year-end accounting of expenditures for the Grant. This report must include:
 - I. All costs paid by the Grantee in support of the activities of the grant.
 - II. A summary of the cumulative obligation and disbursement of funds to sub-contractors.
 - III. A financial statement from each sub-contractor identifying funds received and expended for each category of service.

9. Rights in Data

- a) If applicable for the type of services provided under the Agreement, DOH retains ownership of all client data collected under this grant.
- b) Grantee may not utilize any or all of the data collected pursuant to this Grant for any purpose not specifically related to performance under this Agreement without the express written consent of DOH, which consent shall not unreasonably be withheld, delayed or conditioned.
- c) Applicable federal and District policies and federal regulations shall govern any research involving the use of human subjects. If applicable, the Grantee agrees to review any research activities involving human subjects by a designated Institutional Review Board (IRB) and to continue annual monitoring to assure compliance with requirements for the protection of human subjects. At such time, a copy of HHS Form 596, "Protection of Human Subjects Assurance, Certification, Declaration," must be signed and submitted to the Grant Administrator.

10. Public Notification of Funding

When issuing statements, press releases, request for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with federal funds, all Grantees shall clearly state the following:

- a) The percentage of the total costs of the program or project which will be financed with federal funds.
- b) The dollar amount of federal funds for the project or program.
- c) The percentage and dollar amount of the total costs of the project or program that will be financed by non-government sources.

11. Attribution Policy

All Grantees are required to identify their affiliation with DOH in all programs and services funded by DOH and administered by the DOH Administrative Unit. The usage includes, but

is not limited to,

- a) The incorporation of the current approved DOH logo/symbol with attribution statement on letterhead, newsletters, brochures, public service announcements, media publications, and all other forms of advertisement.
- b) The clearly visible display of the DOH logo/symbol transparency at each Grantee's office, on their doors, or, near the entrances to all business offices, or and in reception areas, or other places of public business.
- c) The clearly visible DOH logo/symbol with attribution statement attribution statement at all functions and events sponsored by the Grantee.
- d) Neither DOH nor Grantee will use the name of the other, or its employees, staff or students, either expressly or by implication, in any news, publicity release, or other fashion without the express written approval of the other party to this Agreement. Notwithstanding the foregoing, each party may disclose the existence of this Agreement and acknowledge the other party's participation in the Project in scholarly publications, in listings of sponsored research projects, and for other academic purposes.
- e) The Grantee is required to submit to the Grant Administrator for review and approval prior to production all print and electronic media developed in conjunction with this grant and paid for directly from funding sources received from DOH. This includes: camera-ready copy for fliers, posters, brochures, newsletters, and other printed media; story boards and/or scripts for paid and public service advertising (radio or TV); videotapes, audiocassettes, DVDs, CDs, flash drives, questionnaires, and surveys. DOH reserves the right to disallow all payments relative to these materials if the Grantee is found in non-compliance with the guidelines stated in the Agreement.



“This program is funded wholly, or in part, by the Government of the District of Columbia, Department of Health, [INSERT ADMINISTRATION].”

12. Performance Standards and Quality Assurance

- a) The Grantee shall implement a program to monitor and evaluate the delivery of all services. At a minimum, the quality assurance program shall include a review of the appropriateness, quality and timeliness of the delivery of services.

- b) The Grantee shall, as directed by the Grant Administrator or his/her designee, implement policies and procedures to evaluate the accuracy of data collection and reporting activities in accordance with protocols established by DOH, federal grant program's administrative requirements for grantees, pass-through entities and sub-grantees.
- c) The Grantee shall participate in the evaluation of the project by appropriate DOH staff and/or external evaluators contracted by DOH. These activities may include, but are not limited to, site visits, client surveys, unit cost analyses, program/fiscal assessments, or other data collection activities.
- d) The Grantee shall provide DOH with a copy of all rules and regulations governing its Client Complaint Resolution Process.

13. Performance Monitoring

In order to ensure responsible oversight of the funded project and its implementation by the Grantee, and to provide cooperative technical support for the Grantee, **The DOH shall:**

- a) Conduct within 30 days of the signing of this Agreement, a risk / capacity-assessment in order to establish a monitoring plan for the Grantee in accordance with requirements, procedures and tools approved by DOH, DC Municipal Regulations and standards outlined in the City-Wide Grants Manual. The results of this review shall be shared by the Grant Administrator or his/her designee with the Grantee.
- b) Monitor the performance of the Grantee in the implementation of the funded program in accordance with the terms of this Agreement and the approved monitoring plan.
- c) Assign staff persons to monitor the project. The Program Monitor shall review all programmatic reports, conduct programmatic site visits/inspections, and hold periodic conferences with the Grantee to assess the Grantee's performance in meeting the requirements of this Agreement.
- d) The Grant Administrator shall review all written policies and procedures applicable to the Project, review all financial reports, conduct administrative site visits/inspections, and hold periodic conferences with the Grantee and the Program Monitor to assess the Grantee's performance in meeting the requirements of this Agreement.
- e) Assess the Grantee's performance with respect to the number of people served, quality of the services delivered, and the Grantee's ability to deliver services according to the deadlines established in the Agreement.
- f) Conduct an evaluation of program effectiveness for each service-area based on criteria approved by the Grant Administrator or his/her designee.